

Handbook for the Identification and Review of Students with Severe Disabilities 2007/2008



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Section 1 - General Information

Introduction

Alberta Education provides funding to school authorities to support the development and implementation of programming for students with severe disabilities. The Handbook for the Identification and Review of Students with Severe Disabilities presents case studies to assist school authorities in identifying students who may be eligible for special education programming and services. Specific information related to severe disabilities funding conditions and requirements is in the Funding Manual for School Authorities 2007-2008 School Year.

Funding for students with severe disabilities in school jurisdictions is based on the established severe disabilities jurisdiction profile. Funding for students with severe disabilities in private schools, designated special education private schools and charter schools continues to be based on the approval of students on an individual basis.

School authority personnel should direct enquiries regarding the identification of students with severe disabilities and related funding to Special Programs Branch at (780) 422-6326, toll-free in Alberta by first dialing 310-0000.

Note regarding case studies

Because of the 2007/2008 severe disabilities profile re-alignment process for jurisdictions, the IPPs included as part of the case studies in this handbook have not been changed from the 2006/2007 handbook. However, the monitoring forms have been updated to reflect the supports in place for students in 2007/2008.

Private Schools and Charter Schools 2007/2008 Severe Disabilities Funding Process at a Glance

REQUIREMENT	RESPONSIBILITY	ACTION	DATE
Student Identification	Schools/School Authority	Code students with severe disabilities.	Complete by Sep 28, 2007
Special Programs Branch Report	School Authority	Send student coding to Information Services Branch. Send report via Edulink.	Count as of Sep 28, 2007 Submission by Oct 3, 2007
Identification of students to be monitored	SPB	Special Programs Branch (SPB) provides school with list of students to be monitored.	Mid-October to mid-November 2007
Preparation of documentation for monitoring	School staff	Complete Student Monitoring Form 2007/2008	Complete by mid-November 2007
Monitoring of student files	SPB	Either on-site visit or send copies of file information to SPB when requested. Optional:	November 2007 to January 2008
Severe Disabilities Funding Payment based on September 28, 2007	SPB	School authority advised of number of approved students and next monitoring dates.	Mid-January 2008
enrollment	School Finance Branch	School Finance Branch advised of number of approved students and finalizes payments.	t betagu nee
March Prorated Funding	School/school authority	Identify students with severe disabilities who enroll after September 28, 2007. Resolve any priority school conflicts. Resolve any transfer payments between private/charter schools. Send student coding to Information Services and School Finance branches. send Special Programs Branch Report via Edulink.	Count as of Mar 1, 2008 Submission by Mar 6, 2008

REQUIREMENT	RESPONSIBILITY	ACTION	DATE
Preparation of documentation for prorated funding monitoring	School staff	Complete Student Monitoring Form 2007/2008 include copies of recent assessment/ diagnostic reports include IPP include anecdotal notes, where applicable	Complete by mid-March, 2008
Prorated funding monitoring of student files	SPB	Send documentation to SPB for monitoring when requested	Mid-April 2008
Severe Disabilities Funding Payment based on March 1, 2008 enrollment	SPB	School authority advised of number of approved students and next monitoring dates	Mid-April to May 2008
	School Finance Branch	School Finance Branch advised of number of approved students and finalizes payments	ally Agriculture in the state of the state o

NOTE:

For specific information, refer to Funding Manual for School Authorities 2007-2008 School Year.

School Jurisdictions 2007/2008 Re-alignment of Severe Disabilities Profiles

Jurisdictions should refer to the Alberta Education Extranet for information on the re-alignment review process.

Documentation Requirements for All School Authorities

School jurisdictions, charter schools, private schools, and designated special education private schools that receive funding from Alberta Education for students with severe disabilities must ensure that the following conditions are met.

- Funding for students with severe disabilities is based on all of the following requirements being met and implemented at the school level:
 - assessment and diagnosis by qualified personnel (note: diagnosis alone is not sufficient to qualify for funding)
 - documentation/assessment of the student's current level of functioning in the learning environment
 - a current individualized program plan (IPP) that addresses the student's diagnosed needs
 - identification of the types of supports and services being provided to the student.
- The IPP must be supported by appropriate medical, psychological or other
 professional documentation for each student with a severe disability identified and
 attending a school of the authority.
- Students with severe disabilities must receive three or more levels of support identified below:
 - a) a minimum 0.5 FTE one-to-one instruction/intervention (e.g., teacher and/or teacher assistant time)
 - b) specialized equipment or assistive technology
 - c) assistance with basic care (e.g., toileting, grooming, catheterization)
 - d) frequent documentation of medical and/or behaviour status
 - e) direct support services at a cost to the system (e.g., behaviour specialist, orientation and mobility specialist).
- School authorities will use the severe disabilities categories/codes and related criteria outlined in Special Education Coding Criteria 2007/2008 and the Handbook for the Identification and Review of Students with Severe Disabilities 2007/2008 to determine a student's disabling condition for severe disabilities identification purposes.
- Eligibility for severe disability funding is based on student registration information, as
 of the count date (September 28, 2007), that has been submitted to the Information
 Services Branch by October 3, 2007.
- All school authorities must also send by October 3, 2007, the electronic Special Programs Branch Report that lists the students identified with severe disabilities.
- School authorities that identify students with severe disabilities after September 28
 can submit changes during the year to School Finance Branch on Form 05 AEI.2c
 Base Instruction Add, Modify, Delete Form For Enrolments.

Appeal of Severe Disabilities Funding

Charter, Private, and Designated Special Education Private Schools

In situations where charter or private schools, including designated special education private schools, disagree with the outcome of the monitoring process for individual student severe disabilities funding, an appeal of the decision(s) can be made to the Director of Special Programs Branch using the process outlined below.

- School staff review the monitoring decision to clarify the rationale for the appeal.
- School administrator writes the Director of Special Programs Branch to request an appeal of the decision(s) of the monitoring process.
- The request for an appeal must be received by Special Programs Branch within 10 working days of the school receiving written notification that the student was not approved for severe disabilities funding.
- The appeal information submitted to the Director of Special Programs Branch must include:
 - student's name
 - severe disabilities code
 - Alberta Student Number (ASN)
 - a copy of all documentation contained in the student file that was submitted initially for monitoring.
- No new information can be added or considered during the appeal process.
- The originally submitted student documentation to support the appeal will be reviewed
- After review of the appeal documentation, the contractor may recommend that:
 - the original decision stands or
 - funding is approved.
- The final decision regarding the appeal will be made by the Director of Special Programs Branch and communicated in writing to the school authority and School Finance Branch.

School Jurisdictions

School jurisdictions may request an audit of severe disabilities profile funding by writing the Director of Special Programs Branch by November 1, 2007. The Director of Special Programs Branch will arrange for a review team to visit the jurisdiction.

- The audit will consider the eligibility and approval of severe disabilities funding based on a review of each student's file. Each file must contain all the following information:
 - assessment and diagnosis by qualified personnel (note: a diagnosis alone is not sufficient to qualify for funding)
 - documentation/assessment of the student's current level of functioning in the learning environment
 - a current IPP
 - identification of the levels of support and services being provided to the student.
 Students claimed for severe disabilities funding must receive three or more levels of support.

- The review team will recommend to the Director of Special Programs Branch that the severe disabilities jurisdiction profile:
 - be increased
 - be decreased, or
 - remain the same.
- The results of the audit will be communicated in writing to the school jurisdiction and School Finance Branch.

Section 2 - Severe Disabilities Categories

Severe Cognitive Disability (Code 41)

Special Education Coding Criteria

A funded student with a severe cognitive disability is one who:

- has severe delays in all or most areas of development
- frequently has other disabilities including physical, sensory, medical and/or behavioural
- requires constant assistance and/or supervision in all areas of functioning including daily living skills and may require assistive technology
- should have a standardized assessment, which indicates functioning in the severe to
 profound range (standardized score of 30 ± 5 or less). Functional assessments by a
 qualified professional will also be considered in cases where the disabilities of the
 student preclude standard assessments
- has scores equivalent to the severe to profound levels on an adaptive behavioural scale (e.g., AAMR Adaptive Behaviour Scales-School: Second Edition (ABS-S:2);
 Vineland Adaptive Behaviour Scales; Scales of Independent Behaviour - Revised).

Questions and Answers

What are the main characteristics of a student who meets the special education coding criteria for a severe cognitive disability?

- The functional level is less than one third of his/her chronological age on a standardized adaptive behaviour scale.
- The student may also:
 - be medically fragile
 - require assistive technology
 - have autistic-like, aberrant behaviours
 - have limited, if any, receptive or expressive language.
- The student's level of dependency requires mostly one-to-one and hand-over-hand assistance to perform tasks for ambulation or daily living and functioning.
- These students usually require extensive supports and services including one-to-one teacher assistant time, assistance with basic care, and additional therapeutic services.
- It is unlikely that the student will acquire basic numeracy and literacy skills.

What documentation is required to determine the student meets the special education coding criteria?

- The use of adaptive behaviour scales to obtain functional ability scores in the severe to profound range is required. These students are not usually assessable using the WISC-IV or Stanford-Binet V
- Once an initial diagnosis has been given and the student has a chronic disability that
 has not changed significantly, documentation from the Regional Educational
 Consulting Service providers (REACH, CASE, ERECS, RÉSEAU) or other
 personnel specializing in the field may be sufficient for programming.

What other supporting documentation relevant to the student's disabling condition and programming requirements should be provided?

- Physical therapy reports, occupational therapy reports, speech-language therapy reports, as required.
- · Current relevant medical reports.

For additional information please refer to the case study on pages 9 to 19.

2007/2008 Severe Disabilities Re-alignment (Jurisdictions only)

Student File Requirements—Code 41 Submit a copy of each of the following documents:
 □ diagnosis of severe to profound cognitive ability □ specialized assessment report and/or medical report and/or functional assessment report completed between September 1, 2002 and September 30, 2007
☐ Individualized Program Plan 2006/2007 or 2007/2008 for new or recently identified students
□ Alberta Education Student Monitoring Form Severe Disabilities Funding 2007/2008

Case Study — Brandon

Background information, description of severe disabling condition(s)	 Brandon is a seventeen-year-old student in a Life Skills Program at Uphill High School. A recent AAMR Adaptive Behaviour Scales School: Second Edition and the Leiter International Performance Scale: Revised, were completed by S. Adams, Registered Psychologist, indicating that Brandon's intellectual functioning and adaptive functioning in January 2004 was less than one third of his chronological age. Brandon is ambulatory, non-verbal and requires ongoing assistance with his personal care.
Current supports/services in place	 Brandon is in a special education class with nine students, a 1.0 FTE teacher and 3.0 FTE teacher assistants. Brandon requires one-on-one assistance for personal care, feeding and communication. In consultation with a speech-language pathologist, a Picture Communication Symbols (PCS) communication board has been developed. Teacher assistant uses the Mayer-Johnson PCS program on a classroom computer to modify instructional materials to Brandon's level. Brandon is receiving consultation support from an occupational therapist to assist with fine motor skills and feeding issues. His family is also accessing support from Family Support for Children with Disabilities and the I CAN Centre at the Glenrose Rehabilitation Hospital.
Individualized Program Plan	 Brandon's IPP was developed by the learning team, including his parents. Goals reflect his needs in communication, fine motor skills, personal care and life skills development.



Student Monitoring Form Severe Disabilities Funding 2006/2007

	PLEASE CHECK CODE
× 41	Severe Cognitive
42	Severe Emotional/Behavioural
43	Severe Multiple
44	Severe Physical or Medical, including Autism
45	Deafness
<u> </u>	Blindness

2006/2007	46 B	lindness	
School Authority ABC Authority		·	
School Uphill High School			
Student Name Brandon Smith			
Alberta Student Number (ASN) XXXXXX			
` · · · · · · · · · · · · · · · · · · ·	^^^	Condo Unavadad	
Birth date (yy/mm/dd) 89/07/15	1	Grade Ungraded	
Placement (describe) Special education of	lass 		
1. Supporting documentation from the ap	opropriate profess	sional(s) (please attach copies):	
Diagnosis	Year of Diagnosis	Professional Conducting Assess	sment
Intellectual and adaptive functioning: < 1/3 chronological age	January 2004	S. Adams, Registered Psychologist	
Additional assessment information (pl	lease attach copie	es):	
		Make the second	
How does the condition/disability impa Ambulatory, non-verbal and requires ass	act the student in istance with persor	the learning environment?	
	•		
3. Services provided in accordance with School Year. Identify three or more of provided to the student:	the <i>Funding Manu</i> the following sup	ual for School Authorities 2007-2008 ports from (a) to (e) that are being	•
a) Frequent specialized one-on-one in	ntervention during	2007/2008:	
a, Troquent opeolaneed one on-one in	intervention during	g 2007/2000.	
X specialized setting with teacher		7 (hours per day); 1:9 (staff:stude	ent ratio)
small group work with teacher and/	or teacher assistan	t (hours per day) (staff:stude	ent ratio)
X teacher assistant			ent ratio)
interpreter		(hours per day); (staff:stude	ent ratio)
other (specify)	·		
b) Specialized equipment and/or assi	stive devices prov	vided during 2007/2008:	
X communication devices		X OT/PT equipment	
assistive technology/devices		specialized furniture	
sound field amplification		personal FM system	
other (specify)		specialized software	

c) Assistance with personal care/	health-related interventions pr	ovided during 2007/2008:
X assistance with personal hygien	e lifts and transfers	X OT/PT therapy
catheterization	respiratory therapy	X feeding program
g-tube feeding	management of equipmer	nt oxygen administration
administration of medication	O&M training	mobility training (wheelchair,
other		walker)
d) Frequent documentation of beh	navioural and/or medical status	s during 2007/2008:
Behaviour checklist	anecdotal notes behaviour	plan other
Frequency •	hourly daily	weekly monthly
X Medical medical logs	medical emergency plan	X other Monitor personal care
Frequency ■	hourly X daily	weekly monthly
Services must be provided to the individual itinerant teacher special education consultant hearing consultant Cocupational therapist O&M specialist	X speech therapist ATL consultant registered psychologist physical therapist school liaison worker	vision consultant nursing services audiologist behaviour specialist school counsellor
other Individualized Program Plan (IPP) i	s in place for 2007/2008:	-
X The current IPP identifies the ass programming to address those no		includes specific educational
X This IPP has been developed, imparent/guardian.	plemented and signed by the lea	arning team, including the
DECLARATION televant assessment documentation to upports listed in 3 (a-e) are in place, a tudent meets the Severe Disabilities F	current IPP is included in the	
September 18, 2007		T. Jones
Date	Signature of S	School Authority Designate

Individualized Program Plan

Student Information

Student: SMITH, Brandon

Parents: Mr. and Mrs. John Smith Date I.P.P. Created: September 10, 2006

Address: 1234–56 St **Phone #:** (780) 111-1111

Anywhere, AB T0T 0T0 Eligibility Code: 41

Year of School/Grade: Ungraded special education class

Background information: Classroom context

School: Uphill High School

I.P.P. Coordinator and Classroom Teacher: Ms. Jones

Additional IPP Team Members: Mr. and Mrs. Smith, parents

Mark Chatty, speech-language pathologist

Jody Helper, teacher assistant

Dorothy Pickle, occupational therapist

Background Information: Parental input and involvement

Brandon enjoys being around his peers and uses his communication board to exchange greetings. He is familiar with the school building and is able to go from his classroom to the cafeteria with minimal supervision. Brandon continues to need light physical prompts to initiate grooming routines but he responds positively to the assistance. During breaks and lunch, Brandon requires close supervision to ensure that he chews food thoroughly, as he tends to rush when eating. This year, the focus of programming is to prepare Brandon for entry into a supported living situation by mastering functional life skills with the greatest level of independence so that he has a positive transition into an adult setting two years from now.

Strengths

- imitates well
- likes to make people laugh
- very social and likes to be around people at school, home and in the community
- can consistently use 100 Mayer-Johnson graphics to make needs known to others

Areas of Need

January 2004

- continue to develop communication skills
- · development of pre-vocational skills
- · develop food preparation skills
- gain independence performing simple routines

Medical Conditions that Impact Schooling	Coordinated Support Services
Brandon is in good health. Any medication he requires is administered at home and not during school hours. No current medical conditions that impact schooling	Jody Helper, teacher assistant, is assigned to work with Brandon and two other students 7 hours/day. Mark Chatty, speech-language pathologist, will make a visit at the end of each term to modify Brandon's augmentative communication board and will also support the introduction and trial with four simple voice output communication aids (VOCA). Dorothy Pickle, occupational therapist, will observe Brandon in the classroom and during lunchtime and demonstrate basic care intervention techniques to Jody Helper, at the beginning of the first, third and fourth terms. None required at this time
Assessment Data (Specialized Asses	sment Results)
Date Test	Results

AAMR Adaptive Behaviour

Performance Scale: Revised

Scales: Second Edition

Leiter International

adaptive behaviour rating and

cognitive ability both scored

significantly below his

chronological age

Current Level of Performance and Achievement	Year-end Summary	
September June 2006 assessments classroom functional communication assessment can consistently use 100 graphic symbols to express basic needs consistently uses "yes" and "no" symbols during choice making activities observation checklist of personal care skills able to consistently maintain two hand grasp on a plastic mug or glass requires hand-over-hand to use a fork, knife and spoon during lunch time with light physical prompting can assist in completing grooming and washroom routines	June	
Grade Level of Achievement Reporting I	nformation	
 Adapted programming (graded curriculum) Modified programming (not graded curriculum) 	m)	
	category of each goal and achievement level	
 foundational skills (e.g., communicatio skills) Goals achieved: □ all □ most 	ns, classroom behaviour, gross and fine motor ☐ some ☐ none ☐ not applicable	
 academic readiness skills (e.g., readiness skills to prepare student for learning outcomes in the programs of study in Grade 1 and subsequent grade levels) Goals achieved: □ all □ most □ some □ none □ not applicable 		
 life skills (e.g., skills that will assist the shome, school and community) Goals achieved: all most 	student in developing independence in the	

Long-term Goal: Brandon will be able to communicate choices.

Short-term Objectives	Assessment Procedures	Progress Review
By the end of November, Brandon will make choices in menu planning by pointing to an item in each food group with no errors or duplications/five trials per week.	teacher/teacher assistant observation checklist for data collection	November 30
By February, Brandon will select the program he wants from a list of 10 icons on the computer desktop, with 80% accuracy/four trials per week.	teacher/teacher assistant observation checklist for data collection	February 1
By mid May, Brandon will choose two of five students he wants to work with on four of five occasions/four trials per week.	teacher/teacher assistant observation checklist for data collection	May 15
By the end of June, Brandon will choose four of five students he wants to work with on four of five occasions/four trials per week.	teacher/teacher assistant observation checklist for data collection	June 30

Accommodations and strategies to support objectives

- Keep Mayer-Johnson graphics consistent for names of school staff, family members, and labelling items/objects.
- Use Boardmaker to adapt all curriculum areas and to create work sheets and tests.

Long-term Goal: Brandon will demonstrate a working knowledge of signage commonly found in the community.

and definitionity.		
Short-term Objectives	Assessment Procedures	Progress Review
By October 30, when presented with a series of eight signs that direct (e.g., push, keep left), Brandon will point to the correct sign when verbally requested on five consecutive days.	teacher/teacher assistant observation checklist for data collection	October 30
By December 15, when presented with a series of 20 warning and safety signs (e.g., emergency exit, poison, no smoking), Brandon will point to the correct sign when verbally requested on four out of five days.	teacher/teacher assistant observation checklist for data collection	December 15
By the end of February, Brandon will be able to match pictorial representations of the 28 signs to signs in the school building, with 20 matches on four consecutive days.	teacher/teacher assistant observation checklist for data collection	February 28
By April 30, when presented with a series of 20 community signs (e.g., mail, restroom, use crosswalk), Brandon will point to the correct sign when verbally requested on five consecutive days.	teacher/teacher assistant observation checklist for data collection	April 30
By June 24, Brandon will demonstrate an understanding of directional safety and community signs by complying with the intent of the signs he encounters on any given day	teacher/teacher assistant observation checklist for data collection	June 24

Accommodations and strategies to support objectives

• Use Boardmaker to adapt all curriculum areas and to create work sheets and tests.

Long-term Goal: Brandon will gain independence in simple routines.

Short-term Objectives	Assessment Procedures	Progress Review
By October 30, Brandon will get his own apron and join his cooking group, at each occasion, without prompting.	teacher observation checklist	October 30
By January 30, Brandon will look at his picture schedule and point to what comes next, eight times out of ten trials per day.	teacher/teacher assistant observation checklist	January 30
By April, Brandon will sequence 10 pictures illustrating preparation for school, nine times out of ten on three consecutive days.	 parent observation teacher assistant observation checklist 	March 31
By June 30, Brandon will complete his work routine with a maximum of four verbal cues per routine (total compliance/five trials per week)	teacher/teacher assistant observation checklists	June 30

Accommodations and strategies to support objectives

- Requires hand-over-hand assistance to complete personal care routines.
- Use light, physical prompting to initiate tasks in a small group.
- Use Boardmaker to adapt all curriculum areas and to create work sheets and tests.

Long-term Goal: Brandon will demonstrate an understanding of food safety and safe handling of kitchen utensils.

Short-term Objectives	Assessment Procedures	Progress Review
By October 30, when given a verbal prompt, Brandon will wash his hands before handling food without resistance each and every time	teacher/teacher assistant observation checklist	October 30
By January 30, Brandon will demonstrate hygienic washing of pots and pans, using a rinse cycle and the loading of a dishwasher completing the steps using only his communication board, 12 of 15 times.	teacher/teacher assistant observation checklist	January 30
By April, Brandon will sequence 10 pictures illustrating preparation for school, nine times out of ten on three consecutive days.	parent observation teacher/teacher assistant observation checklist	April 1
By June 30, Brandon will complete his work routine with a maximum of four verbal cues per routine (total compliance/five trials per week).	teacher/teacher assistant observation checklist	June 30

Accommodations and strategies to support objectives

- Requires hand-over-hand assistance to complete personal care routines.
- Use light, physical prompting to initiate tasks in a small group.
- Keep Mayer-Johnson graphics consistent for names of school staff, family members, and labelling items/objects.
- Use Boardmaker to adapt all curriculum areas and to create work sheets and tests.

Planning for Transition

Mr. & Mrs. Smith are exploring options for community-based living arrangements for Brandon upon completion of high school. Due to the degree of independence required by many of the agencies, the focus of both home and school interventions will be providing Brandon with the opportunity to master as many basic care routines and skills as possible over the next two years. Both school staff and parents will ensure that all assessments and reports are updated and submitted to the appropriate agencies so that Brandon receives necessary benefits upon completing high school. Brandon uses a static display communication board. To increase his opportunities to communicate with peers, he should be introduced to a simple voice output communication aid that is durable and portable, using the same Mayer-Johnson symbols and board arrangement. This should support him in becoming more confident and independent when initiating contact with friends and peers.

static display communication board. To increase his opportunities to communicate with peers, he should be introduced to a simple voice output communication aid that is durable and portable, using the same Mayer-Johnson symbols and board arrangement. This should support him in becoming more confident and independent when initiating contact with friends and peers.				
Additional Information				
Arrange for trials of four simple VOCAs from the I CAN Centre, Glenrose Rehabilitation Hospital.				
Signatures				
I understand and agree with the information contained in this Individualized Program Plan.				
Mr. & Mrs. Smith Parents	September 12, 2006 Date			
Ms. Jones IPP Coordinator/Teacher	September 12, 2006 Date			
Ms. I.M. Busy Principal	September 12, 2006 Date			

Severe Emotional/Behavioural Disability (Code 42)

Special Education Coding Criteria

A funded student with a severe emotional/behavioural disorder is one who:

- displays chronic, extreme and pervasive behaviours, which require close and
 constant adult supervision, high levels of structure, and other intensive support
 services in order to function in an educational setting. The behaviours significantly
 interfere with both the learning and safety of the student and other students. For
 example, the student could be dangerously aggressive and destructive (to self
 and/or others), violent and/or extremely compulsive; and
- has a diagnosis including conduct disorder, schizophrenia or bipolar disorder, obsessive/compulsive disorders, or severe chronic clinical depression; and may display self-stimulation or self-injurious behaviour. In the most extreme and pervasive instances, severe oppositional defiant disorder may qualify.

A clinical diagnosis within the last 2 years of a severe emotional/behavioural disorder by a psychiatrist, registered psychologist or a developmental pediatrician is required, in addition to extensive documentation by school authorities on the nature, frequency and severity of the disorder. The effects of the disability on the student's functioning in an education setting should be described. An ongoing treatment plan/behaviour plan should be available and efforts should be made to ensure that the student has access to appropriate mental health and therapeutic services.

A clinical diagnosis of a severe emotional/behavioural disorder is not necessarily sufficient to qualify under this category. Some diagnoses with behavioural components that are not sufficient to qualify are: attention deficit/hyperactivity disorder (ADHD), attention deficit disorder (ADD).

Note: Students diagnosed with fetal alcohol spectrum disorder (FASD), in the most severe cases, should be reported under Code 44 rather than Code 42.

Questions and Answers

What documentation is required to determine students meet the severe emotional/behavioural disability coding criteria?

- Documentation in the student's file should include the following type of information:
 - a behaviour assessment report that includes a specific clinical diagnosis
 - anecdotal notes that describe the nature, frequency and severity of the aberrant behaviour and the impact on learning
 - behaviour plan.
- The clinical diagnosis of a severe emotional/behavioural disability is made by a psychiatrist or registered psychologist.
- The diagnosis of a severe emotional/behavioural disability is summative and involves a range of measures and indicators, including standardized assessments, clinical and medical history, anecdotal records, observation, and interviews with students, parents and school staff.

What type of information may be included in a behaviour assessment report?

- The type of information typically found in a behaviour assessment report includes:
 - assessment/diagnostic information that clarifies and documents history which may have precipitated the current behaviours
 - recent medical history noting any medication that modifies the student's behaviour and further assessments/follow-up appointments
 - interviews/surveys (e.g., Behaviour Assessment System for Children, Second Edition (BASC-2) or Conners Rating Scales-Revised, filled out by parents, teacher(s), and student, if appropriate), that outline the concerns with the student's behaviour
 - documentation as to the nature, frequency and severity of the specific behaviour and steps taken so far to mitigate it
 - observations and assessment results from the psychiatrist/registered psychologist making the clinical diagnosis.

How much detail does Alberta Education require in the anecdotal documentation for students with severe emotional/behavioural disabilities? What is required?

- Alberta Education needs to know the specific behaviours the student exhibits that are extreme, pervasive and impact the educational setting. For example, what does a typical week look like?
- To document this, you could prepare a chart (see example on p. 24) that shows
 what the student's actual behaviours are and the frequency of these behaviours over
 a period of time.
- The information gathered from checklists and anecdotal notes should assist in programming for each student and serve a functional purpose.
- The information should be summarized in point form.
- You may want to consider adding time of day to the chart in order to see if the student functions better in the morning or afternoon. This will help to determine what preventative strategies you need to put into place or what changes to routines or direct teaching of social or adaptive skills would benefit the student.

How can I demonstrate that the student's behaviour is severe?

- A concise summary of anecdotal notes and checklists that describe the nature, frequency and severity of the student's behaviour at the time she or he was identified by the school authority, in addition to the behaviour assessment report,
- Documentation that describes the nature, frequency and intensity of the interventions that are needed to maintain appropriate student behaviour.
- Summary of behaviours and results of school interventions required to maintain or improve appropriate behaviours.

The student's behaviour has improved significantly with all the programming supports that are in place. Will the student still meet criteria?

The student may continue to meet the criteria, provided that appropriate behaviours
are maintained only because of the level and degree of supports and programming
aligned with an appropriate diagnosis. This information should be recorded in the
IPP.

Should the teacher/parent communication book and/or the teacher's daily checklist be included in the package for a student?

 Communication books and daily checklists are useful for sharing information with parents and tracking behavioural incidents, but they do not usually provide sufficient descriptive information.

For additional information, please refer to the case study on pages 23 to 33.

2007/2008 Severe Disabilities Re-alignment (Jurisdictions only)

udent File Requirements—Code 42 bmit a copy of each of the following documents:
behaviour assessment report that includes a specific clinical diagnosis made between September 1, 2005 and September 30, 2007
Individualized Program Plan 2006/2007 or 2007/2008 for new or recently identified students
the most recent behaviour plan for this student if this information is not part of either the 2006/2007 or 2007/2008 IPP
Alberta Education Student Monitoring Form Severe Disabilities Funding 2007/2008
a concise, one-page summary of anecdotal notes that describe the nature, frequency and severity of the aberrant behaviour's impact in school (See example on page 33)

Case Study — Harley

Background information, description of severe disabling condition(s)

- Harley is a fifteen-year-old boy in Grade 10 at Dry Creek High School.
- Harley currently resides in a foster home near the school.
- Harley was diagnosed as having bipolar disorder by Dr. Bunton in July 2005.
- Harley is currently under the care of Dr. Panwhar, psychiatrist, who has prescribed medication to help control Harley's episodes.
- Some of the features of Harley's behaviours that impact his learning at school include:
 - truancy
 - failure to complete school assignments
 - anxiety attacks
 - depression
 - mood swings, manic episodes (e.g., grandiose talk, agitation, withdrawal)
 - extreme withdrawal, no peer relations, unresponsive, constant crying
 - self-injurious behaviour.

Current supports/services in place

- Harley is in a regular Grade 10 program. He has a teacher assistant for three hours each day for one-onone support.
- He receives one-on-one counsellor support for one half-hour each day from the school counsellor, who also is trained in management of emotional and behavioural disorders.
- A special education consultant works with the teachers and educational assistant on a monthly basis to review and revise programming strategies.
- The school counsellor has regular contact with Harley's psychiatrist, who also is part of Harley's support team.
- Harley meets with his psychiatrist monthly.
- Harley also has regular meetings with the social worker in charge of his case.

Individualized Program Plan

- Harley's IPP was developed by the learning team, in consultation with his legal guardian, psychiatrist, special education consultant and social worker.
- Harley's overall program focuses on helping him cope with social, emotional and academic needs.
- The major behaviour management goals identified from the behaviour chart completed during September 2006 are:
 - teaching self-regulation strategies
 - increasing organizational skills and reducing offtask behaviours
 - learning coping skills for anxiety attacks.

Sample Behaviour Chart

NAME: Harley					MC	NTH	1: D	ecem	ber:	2006				
Dat	te:	4	5	6	7	8	9	10	11	12	13	14	15	Frequency Tally
Attended school (weekend W attended ✓ did not attend	X)	1	1	х	1	~	W	W	х	1	~	~	1	8/10
Met with counsellor (Yes ✓)		/	1		1	~					1	1	~	7/10
Took medication (Yes ✓)		1	1		1	1				1	1	1	1	8/10
Attended work experience (Yes	~)	1	✓	1	1	1				1	1	~	1	9/10
Felt anxious/restless/	m	1	1	1	1	1			1	1	1	1	1	10/10
agitated (Yes ✓) — pr	m	1	1	1	1	1			1	1	1	1	1	10/10

The tallies of this chart inform the goals of Harley's IPP. For example, the high frequency of Harley's feelings of anxiety suggest that reduction in this area is a priority goal. From consultation with the counsellor, it became clear that Harley's anxiety is tied to working with peers. Therefore, it was deemed appropriate to monitor his frequency of attendance and consistency in taking his medications, which help to stabilize his mood. Further, more specific checklists would be developed to monitor each of the objectives related to Harley's long term goals.



45 Deafness 46 Blindness

Severe Disabilities Fund 007/2008	ling 45 De	evere Physical or Medical, including Autism eafness indness
00772008	40 81	municos
chool Authority ABC Authority		
chool Day Creek High School		
tudent Name Harley		
berta Student Number (ASN) XXX	(XXXXX	
irth date (yy/mm/dd) 91/03/17		Grade 10
acement (describe) Regular Grade	10 program	
Supporting documentation from the		ional(s) (nlease attach conies):
Supporting documentation from the	Year of	
Diagnosis	Diagnosis	Professional Conducting Assessment
Bipolar disorder	July 2006	Dr. Bunton
		onsive, crying when he becomes anxious
Services provided in accordance was school Year. Identify three or mor provided to the student: a) Frequent specialized one-on-or-or-or-or-or-or-or-or-or-or-or-or-or-	e of the following sup	ports from (a) to (e) that are being
a) Trequent specialized one-on-o	ie intervention provid	ca damig 2007/2000.
appointment potting with to other		
specialized setting with teacher		(hours per day); (staff:student ratio
small group work with teacher a		(hours per day) (staff:student ratio
small group work with teacher a X teacher assistant		(hours per day) (staff:student ratio (hours per day); 1:1 (staff:student ratio
small group work with teacher a X teacher assistant interpreter		(staff:student ratio
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small group work with teacher a X teacher assistant interpreter	and/or teacher assistant	3 (hours per day); 1:1 (staff:student ratio
small group work with teacher a x teacher assistant interpreter other (specify)	and/or teacher assistant	(hours per day); (staff:student ratio (hours per day); 1:1 (staff:student ratio (hours per day); (staff:student ratio
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small group work with teacher at teacher assistant interpreter other (specify) b) Specialized equipment and/of communication devices	and/or teacher assistant	(hours per day); (staff:student ration of the control of the contr

c) Assistance with personal care/he	ealth-related interventions p	provided during 2007-2008:
assistance with personal hygiene catheterization g-tube feeding administration of medication other	lifts and transfers respiratory therapy management of equipment O&M training	feeding program oxygen administration OT/PT therapy mobility training (wheelchair, walker)
d) Frequent documentation of beha	avioural and/or medical statu	us during 2007/2008:
X Behaviour X checklist and Frequency →	ecdotal notes behaviour	plan other weekly monthly X other Monitor personal care weekly monthly
e) Direct support services for the s e.g., Regional Educational Consulting Servi Services must be provided to the individual	ice teams: (REACH, CASE, ERECS,	RESEAU), Student Health Partnership.
itinerant teacher X special education consultant hearing consultant occupational therapist O&M specialist other	speech therapist ATL consultant registered psychologist physical therapist school liaison worker	vision consultant nursing services audiologist behaviour specialist X school counsellor ½ hr/day; 1:1
Individualized Program Plan (IPP) is in X The current IPP identifies the assess programming to address those needs	sed needs of the student and i s.	·
X This IPP has been developed, implein parent/guardian.	mented and signed by the lea	rning team, including the
ECLARATION elevant assessment documentation to su upports listed in 3 (a-e) are in place, a cu tudent meets the Severe Disabilities Fund	rrent IPP is included in the	
September 18, 2006		B. Moore
Date	Signature of S	chool Authority Designate

Individualized Program Plan

Student Information

Student: JONES, Harley Edward

Date of Birth: 03/17/1991 **Age as of Sept. 1/2006:** 15

Parents: Susan and Henry Smith Date I.P.P. Created: September 10, 2006

Address: R.R. 3 **Phone #:** (403) 111-1111

Rural Alberta, AB T0T 0T0 Eligibility Code: 42

Year of School/Grade: Grade 10

Background information: Classroom context

School: Dry Creek High School

I.P.P. Coordinator and Classroom Teacher:

Additional IPP Team Members: Harley Jones, student

Susan and Henry Smith, guardians Dr. Jabir Panwhar, psychiatrist Jane Glass, school counsellor Mike Cardinal, teacher assistant Judy Cook, special education consultant

Brenda Lively, vice-principal

Background Information: Parental input and involvement

Harley continues to adjust to living with the diagnosis of bipolar disorder. It is critical that all teachers maintain regular and consistent communication with his guardians, either by telephone or e-mail. General strategies for supporting Harley's social interactions with staff and peers have been distributed and should be reviewed by staff on a regular basis. Harley has begun to experience more intense fine motor tremors, a side effect of the medication. For this reason, he will continue to use a Laser PC6 to assist with completing written activities and his Palm Pilot for tracking assignments and recording mood chart information.

 continue to develop self-regulation strategies improving social interactions with peers and teachers Medical Conditions that Impact Schooling Harley is on medication for bipolar disorder, which is to be taken before lunch under the supervision of the teacher assistant. The time and dosages are to be recorded on a daily basis and sent to his psychiatrist at the end of each month. Refusals to take medication should be recorded and his guardians notified immediately when these situations occur. Information sheets explaining bipolar disorder and the side effects of medication have been distributed to all his teachers and teacher assistant. Staff who observe possible side effects from the medication are requested to contact Harley's guardians immediately. No current medical conditions that impact schooling 						
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Assessment Data (Specialized Assessment Results)		1	ent Results)	Ι		
	Date					
November 2004 • psycho-educational	November 2004	1 '	tional			
255555.12						
June 2006 • referred for psycho- educational and functional • School counsellor will consult with Dr. Panwhar to	June 2006					

behavioural assessments

determine the optimal time for these assessments to

take place.

Current Level of Performance and Achievement	Year-end Summary
September Note: Referral has been made for achievement testing to support development of academic IPP goals/objectives.	June
Grade Level of Achievement Reporting I	nformation
☐ Adapted programming (graded curriculum)	
☐ Modified programming (not graded curriculu	ım)
If student is on a modified program, indicate relative to each goal category:	e category of each goal and achievement level
 foundational skills (e.g., communicatio skills) 	ns, classroom behaviour, gross and fine motor
Goals achieved: ☐ all ☐ most	☐ some ☐ none ☐ not applicable
 academic readiness skills (e.g., readined outcomes in the programs of study in Gradiness achieved: 	
life skills (e.g., skills that will assist the shome, school and community)	student in developing independence in the
Goals achieved: all most	□ some □ none □ not applicable

Long-term Goal: Harley will independently identify situations that make him anxious and demonstrate strategies to reduce his anxiety.

Short-term Objectives	Assessment Procedures	Progress Review
When asked by the counsellor, Harley will be able to verbally describe two types of classroom situations that make him anxious on four of five days and record this information on his behaviour chart.	counsellor, teachers and teacher assistant will record and chart incidents to identify patterns related to the onset of feelings of anxiety.	
By December 20, Harley will be able to describe three actions he can take to reduce his anxiety in classroom situations and successfully demonstrate these actions in four instances, for five consecutive days.	 teacher, teacher assistant and counsellor observation daily checklist 	
By February 28, Harley will be able to respond in a positive manner to potentially anxiety-producing situations for ten consecutive days.	Teacher, teacher assistant and counsellor observations daily checklist	
When asked by the counsellor, Harley will independently complete his mood chart with 100% accuracy at the end of each morning.	counsellor observation	

Accommodations and strategies to support objectives

- · Reduced course load and attend classes only in the morning.
- Afternoon work experience with local theatre company in the carpentry department.
- · Allow additional time for tests/examinations.
- Allow student to write in a small group setting, with teacher assistant supervision, to reduce performance anxiety.
- Modify classroom and homework assignments according to fluctuations in his emotional status.
- Use Palm Pilot to complete daily mood chart record.

Long-term Goal: Harley will work cooperatively with peers in the classroom.

Short-term Objectives	Assessment Procedures	Progress Review
By October, Harley will work cooperatively with a teacher-selected partner and complete assigned tasks four out of six periods, within the time allocated and with teacher assistant supervision, in each class.	teacher/teacher assistant observations of process and number of completed assignments	
By February 28, when given a cooperative small-group assignment (teacher-selected peers), Harley will work cooperatively and complete assigned tasks 85% of the time with teacher assistant supervision.	teacher/teacher assistant observations of process and number of completed assignments	
By May, when given the free choice of working with a partner, Harley will work cooperatively and complete assigned tasks three times out of four. * teacher/teacher assistant observations and number of completed assignments	teacher/teacher assistant observations of process and number of completed assignments	

Accommodations and strategies to support objectives

- Afternoon work experience with local theatre company in the carpentry department.
- · Extra set of text books at home.
- Permit and encourage use of the Laser PC6 features (e.g., word processing, spreadsheets, scientific calculator, text-to-speech) to support note taking and assignment completion.
- Use Palm Pilot for recording assignments and scheduling timelines for completing projects.

Planning for Transition

- Course selection and timetabling for second semester will be finalized in November.
- Arrangements will be made for a home-bound teacher to provide services either at home or in the hospital, should Harley be unable to attend school for periods of time this year.
- The counsellor will arrange for three case conferences to be held this school year involving the learning team and Harley's psychiatrist and social worker.
- The counsellor will review the purpose and importance of the behaviour chart with teachers and the teacher assistant.
- The counsellor and Harley will determine if and when they will do a short presentation to his peers and teachers regarding the impact of his illness on his learning and social interactions.

Additional Information	
Signatures	
I understand and agree with the information contained in this Individualized Program Plan.	
Mr. & Mrs. Smith	<u>September 12, 2006</u>
Parents	Date
IPP Coordinator/Teacher	September 12, 2006 Date
Principal Principal	September 12, 2006 Date

Summary of Behaviour Anecdotal Notes—September 28, 2006

Student:Harley Edward JonesSchool:Dry Creek High SchoolGrade:10Teacher:Jane Glass, Counsellor

Priority presenting behaviour(s):

What are the behaviours?

Describe what they look like in the educational environment.

During the month of September, Harley exhibited several behaviours at school which caused concern for staff. These included being truant from school, failing to complete classroom assignments and homework, and rapid changes in mood. The most significant area of concern is the increase in the number and frequency of anxiety attacks Harley has had since school began earlier this month. Harley describes he has racing thoughts during his anxiety attacks. His teachers have observed that during his anxiety attacks, he talks excessively and that it is very difficult to follow his conversation because he moves so rapidly between topics he appears incoherent. He becomes so agitated that he cries in front of his classmates and then physically lashes out at them when they comment about his show of emotion. These aspects of his behaviour are of most concern because of the impact they have on his peer interactions and ability to participate in class work.

Frequency of priority behaviour(s):

Give the number of intense attacks.

Describe chronic episodes. Since September 3, Harley has reported that he has experienced approximately 20 intense anxiety attacks while at school. His behaviour chart indicates that he is in an almost constant state of anxiety. A review of his behaviour chart shows that he is feeling anxious, restless or agitated for almost the entire school day. This information was collected by Harley and collated with the assistance of the school counsellor. From September 4 to 15, he reported a total of 20 anxiety attacks, which were evenly distributed between morning and afternoon.

Impact of the priority behaviour(s):

What happens as a direct result of these behaviours?

During five of the anxiety attacks, which occurred during two morning breaks, two morning classes and one afternoon class, Harley got into physical fights with peers. These incidents resulted in two 2-day suspensions and one 5-day suspension for fighting for both Harley and the other students. During the third incident, Harley sustained a severe blow to his head and was taken by ambulance to the local emergency room. After each of these incidents, Harley shared that he was "worthless" and "would not survive to finish school." He is often reported to appear sad and no longer wants to be around other students.

Plan and supports to address the priority behaviour(s):

Who is involved?

What are the supports and how do they relate to a plan?

School staff, parents, and Harley met to develop a plan to support him at school. It was decided that he would meet with the school counsellor every day for 30 minutes. As well, to build on his interest in theatrical set design, a work experience placement at the local theatre has been arranged. A teacher assistant will accompany him to his placement during the afternoons. The number of courses he will take each semester has been altered to accommodate this change. This plan will be reviewed in mid-October to determine if changes or alternations are required to his IPP.

Severe Multiple Disability (Code 43)

Special Education Coding Criteria

A funded student with multiple disabilities is one who:

- has two or more non-associated moderate to severe cognitive and/or physical disabilities which, in combination, result in the student functioning at a severe to profound level; and
- requires significant special programming, resources and/or therapeutic services.

Students with a severe disability and another associated disability should be identified under the category of the primary severe disability. For example:

- A student with a severe cognitive disability and another associated disability is not designated under this category, but is designated under severe cognitive disability.
- A student with a severe emotional/behavioural disability and another associated disability is not designated under this category, but is designated under severe emotional/behavioural disability.

The following mild or moderate disabilities cannot be used in combination with other disabilities to qualify under Code 43:

- attention deficit/hyperactivity disorder (ADHD) attention deficit disorder (ADD)
- emotional/behavioural disabilities
- learning disability (LD)
- · speech and language-related delays.

Questions and Answers

What are the main characteristics of a student who meets the special education coding criteria for severe multiple disability?

A student with a severe multiple disability may exhibit two or more of the following:

- moderate cognitive disability (standardized score of $30 50 \pm 5$)
- severe cognitive disability (standardized score of 30 + 5 or less)
- bilateral hearing loss in the moderate to severe range; average of 56 70 decibels over 500 – 4000 Hz in the better ear reported by the appropriate specialist
- visual impairment that is moderate to severe (20/100 in the better eye), but not legally blind, degeneration prognosis reported by the appropriate specialist
- moderate to severe autistic-like behaviour
- moderate to severe physical disability or medical condition that interferes with learning.

NOTE: Low cognitive ability in the mild/moderate cognitive disability ranges combined with severe receptive/expressive language deficits does not qualify.

What documentation is required to meet the coding criteria?

- Diagnoses by professionals for each of the two or more non-associated disabling conditions. This may include reports from registered psychologists, audiologists, ophthalmologists and medical professionals.
- Current documentation should be in the student's file.
- If a student has two or more non-associated disabilities that have not changed significantly, a current functional assessment from Regional Educational Consulting Service teams (REACH, CASE, Edmonton Regional Educational Consulting Services, RÉSEAU), Student Health Partnership, school authority specialists or other contracted consulting agencies may be sufficient.
- A diagnosis of each of the disabling conditions is required but not necessarily sufficient to qualify. Eligibility depends on the student's current level of functioning within the learning environment.

What other supporting documentation from a school, relevant to the student's disabling conditions and programming requirements, may be included with the student package for monitoring by Alberta Education?

- physical therapy, occupational therapy, speech-language therapy reports
- vision and/or hearing consultant reports
- current and relevant medical reports
- additional documentation, including anecdotal information, reflecting the student's needs in the learning environment.

For additional information please refer to the case study on pages 36 to 45.

2007/2008 Severe Disabilities Re-alignment (Jurisdictions only)

Student File Requirements—Code 43 Submit a copy of each of the following documents:	
☐ diagnosis of two or more non-associated cognitive and/or physical disatthe moderate to severe range	abilities in
□ specialized assessment report and/or medical report and/or functional assessment report completed between September 1, 2002 and Septe 2007 that clearly indicate that the combination of diagnosed disabilities functioning in the severe to profound level	mber 30,
☐ Individualized Program Plan 2006/2007 or 2007/2008 for new or recer identified students	ıtly
☐ Alberta Education Student Monitoring Form Severe Disabilities Funding 2007/2008	g

Background information, description of severe disabling condition(s)	 Amina is an eight-year-old student currently in Grade 3 at Caldwell School. Dr. Brown diagnosed Amina in 2003 as having Kabuki make-up syndrome and moderate cognitive delay. In November 2005, she was diagnosed with a moderate hearing loss by R. Dean, audiologist. She presents with generalized low muscle tone, decreased physical strength, delays in gross and fine motor development, poor social skills and a moderate bilateral hearing loss. The occupational therapist and physical therapist both report Amina's need for assistance with toileting, dressing, and feeding and for constant supervision, as she has a danger of falling, especially on the stairs.
Current supports/services in place	 Amina currently receives individual support 4 hours a day from a part-time teacher assistant and 30 minutes a day in a small group from a teacher assistant who is assigned to the classroom. Amina receives small group instruction for mathematics and pro-social skills. She also receives ongoing individual assistance to maintain attention to task and to complete all tasks in the classroom environment. Amina requires assistance with dressing and in the washroom. She receives stand-by assistance for all transitions and walking the stairs. Amina receives individual assistance at lunch and recess times. Amina requires an augmentative/alternative communication system and has been referred for assessment at the I Can Centre, Glenrose Rehabilitation Hospital.
Individualized Program Plan	 Amina's IPP was developed in consultation with her learning team, including her parents, the speech-language pathologist, occupational therapist, physical therapist, behaviour specialist and hearing consultant. The goals of Amina's education program address her needs, result from the combination of disabling conditions, and are reflected in the classroom accommodations and level of supervision.



Student Monitoring Form Severe Disabilities Funding 2007/2008

	PLEASE CHECK CODE
41	Severe Cognitive
42	Severe Emotional/Behavioural
X 43	Severe Multiple
44	Severe Physical or Medical, including Autism
45	Deafness
<u> </u>	Blindness

	nool Caldwell School dent Name Amina		
		XXXXX	Crade
	th date (yy/mm/dd) 98/08/30) classroom	Grade 3
a	cement (describe) Regular Grade 3	Classiooni	
	Supporting documentation from the	e appropriate profess	ional(s) (please attach copies):
	Diagnosis	Year of Diagnosis	Professional Conducting Assessment
	Kabuki make-up syndrome	December 2003	Dr. Brown
	Moderate cognitive disability	December 2003	Dr. Brown
	Moderate bilateral hearing loss	November 2005	R. Dean (Audiologist)
-	and a mild to moderate hearing loss.	ne, delays in gross and She frequently loses h such as PE, as she is a	the learning environment? If fine motor development, poor social skills her balance, which limits her participation in at danger of falling. She requires individual
	Amina has generalized low muscle to and a mild to moderate hearing loss. classroom and specialized activities, sassistance with dressing and persona Services provided in accordance with	ne, delays in gross and She frequently loses he such as PE, as she is a I hygiene.	d fine motor development, poor social skills her balance, which limits her participation in at danger of falling. She requires individual half for School Authorities 2007-2008
	Amina has generalized low muscle to and a mild to moderate hearing loss. classroom and specialized activities, sassistance with dressing and personal Services provided in accordance with School Year. Identify three or more provided to the student:	ne, delays in gross and She frequently loses he such as PE, as she is a I hygiene. ith the <i>Funding Manu</i> e of the following sup	d fine motor development, poor social skills her balance, which limits her participation in at danger of falling. She requires individual half for School Authorities 2007-2008 ports from (a) to (e) that are being
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	Amina has generalized low muscle to and a mild to moderate hearing loss. classroom and specialized activities, sassistance with dressing and personal Services provided in accordance with School Year. Identify three or more provided to the student: a) Frequent specialized one-on-one specialized setting with teacher at small group work with teacher and services.	ne, delays in gross and She frequently loses he such as PE, as she is a I hygiene. ith the <i>Funding Manu</i> of the following sup	d fine motor development, poor social skills her balance, which limits her participation in at danger of falling. She requires individual half for School Authorities 2007-2008 ports from (a) to (e) that are being led during 2007/2008: (hours per day); (staff:student ratio)
	Amina has generalized low muscle to and a mild to moderate hearing loss. classroom and specialized activities, sassistance with dressing and personal services provided in accordance with school Year. Identify three or more provided to the student: a) Frequent specialized one-on-one specialized setting with teacher small group work with teacher at teacher assistant	ne, delays in gross and She frequently loses he such as PE, as she is a I hygiene. ith the <i>Funding Manu</i> of the following sup	d fine motor development, poor social skills her balance, which limits her participation in at danger of falling. She requires individual half for School Authorities 2007-2008 ports from (a) to (e) that are being led during 2007/2008: (hours per day); (staff:student ratio)
	Amina has generalized low muscle to and a mild to moderate hearing loss. classroom and specialized activities, sassistance with dressing and persona. Services provided in accordance with School Year. Identify three or more provided to the student: a) Frequent specialized one-on-one specialized setting with teacher small group work with teacher at teacher assistant interpreter	ne, delays in gross and She frequently loses he such as PE, as she is a I hygiene. ith the <i>Funding Manu</i> of the following sup	d fine motor development, poor social skills her balance, which limits her participation in at danger of falling. She requires individual stal for School Authorities 2007-2008 ports from (a) to (e) that are being ded during 2007/2008: (hours per day); (staff:student ratio); (hours per day); (staff:student ratio);
	Amina has generalized low muscle to and a mild to moderate hearing loss. classroom and specialized activities, sassistance with dressing and personal services provided in accordance with school Year. Identify three or more provided to the student: a) Frequent specialized one-on-one specialized setting with teacher small group work with teacher at teacher assistant	ne, delays in gross and She frequently loses he such as PE, as she is a I hygiene. ith the <i>Funding Manu</i> of the following sup	d fine motor development, poor social skills her balance, which limits her participation in at danger of falling. She requires individual stal for School Authorities 2007-2008 ports from (a) to (e) that are being ded during 2007/2008: (hours per day); (staff:student ratio); (hours per day); (staff:student ratio);
	Amina has generalized low muscle to and a mild to moderate hearing loss. classroom and specialized activities, sassistance with dressing and persona. Services provided in accordance with School Year. Identify three or more provided to the student: a) Frequent specialized one-on-one specialized setting with teacher small group work with teacher at teacher assistant interpreter	ne, delays in gross and She frequently loses he such as PE, as she is a I hygiene. ith the Funding Manuar of the following supple intervention provided and/or teacher assistant	d fine motor development, poor social skills her balance, which limits her participation in at danger of falling. She requires individual stall for School Authorities 2007-2008 hoorts from (a) to (e) that are being ded during 2007/2008: (hours per day); (staff:student ratio)
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-	Amina has generalized low muscle to and a mild to moderate hearing loss. classroom and specialized activities, sassistance with dressing and personal services provided in accordance with School Year. Identify three or more provided to the student: a) Frequent specialized one-on-one specialized setting with teacher at teacher assistant interpreter other (specify) b) Specialized equipment and/or communication devices	ne, delays in gross and She frequently loses he such as PE, as she is a I hygiene. ith the Funding Manuar of the following supple intervention provided and/or teacher assistant	d fine motor development, poor social skills her balance, which limits her participation in at danger of falling. She requires individual stal for School Authorities 2007-2008 hoorts from (a) to (e) that are being ded during 2007/2008: (hours per day); (staff:student ratio) (or per day); (staff:student ratio)

c) Assistance with personal care/health-r	elated interventions provi	ided during 2007/2008:
X assistance with personal hygiene I lifts a	and transfers	feeding program
catheterization X respi	ratory therapy	oxygen administration
g-tube feeding X mana	agement of equipment X	OT/PT therapy
administration of medication O&N	training	mobility training (wheelchair,
other		walker
d) Frequent documentation of behavioura	al and/or medical status (p	olease attach examples or summarie
Behaviour checklist anecdotal	notes behaviour plan	other
Frequency ⇒ hour	ly daily	weekly monthly
X Medical X medical logs X medic	cal emergency plan	other
Frequency ⇒ hou	rly X daily	weekly monthly
X special education consultant ATL	ch therapist consultant	vision consultant nursing services
	tered psychologist	audiologist
X occupational therapist phys	ical therapist	behaviour specialist
O&M specialist scho	ol liaison worker	school counsellor
other		
. Individualized Program Plan (IPP) is in place	for 2007/2008:	
X The current IPP identifies the assessed need programming to address those needs.	eds of the student and inclu	des specific educational
X This IPP has been developed, implemented parent/guardian.	d and signed by the learning	g team, including the
DECLARATION		
Relevant assessment documentation to support upports listed in 3 (a-e) are in place, a current l tudent meets the Severe Disabilities Funding c	PP is included in the stud	
September 25, 2006	M. TI	rompson
Date	Signature of School	ol Authority Designate

Individualized Program Plan

Student Information

Student: KHAN, Amina

Parents: Amy and John Khan Date I.P.P. Created: September 15, 2006

Address: 567-10 Avenue **Phone #:** (780) 111-1111

Big City, AB T9T 9T9 Eligibility Code: 43

Year of School/Grade: 3

Background information: Classroom context

School: Caldwell School

I.P.P. Coordinator and Classroom Teacher: Donna Major Additional IPP Team Members: Amy and John Khan, parents

Angel Young, Special education consultant/IPP coordinator

Pat White/John Gregory, teacher assistants

Michael Hall, speech-language pathologist/audiologist

Mary Smart, occupational therapist

Background Information: Parental input and involvement

Amina is a happy individual who is shy around peers. She has had limited opportunity to interact with age peers, preferring to spend time in the company of older students and adults. Her parents are concerned and have agreed to work with the learning team to have Amina become involved with age peers outside of school through swimming and horse back riding lessons. Mr. and Mrs. Khan found the communication book useful last year and would like that method of information sharing to continue this year. Mary Smart, occupational therapist, is concerned about Amina's difficulty maintaining her balance and has referred her to the seating clinic for assessment and input regarding the purchase of a power scooter that could be used on the playground, school field trips and in the community.

Strengths

- desire to please
- cooperates with teacher assistant to complete transfers during personal care routines
- · enjoys using the computer
- Areas of Need
- communication
- social skills
- · mathematics concept and skill development

Medical Conditions That Impact Schooling	Coordinated Support Services
No current medical conditions that impact schooling	teacher assistant support 4.5 hours/day RECS: hearing consultant, occupational therapist, speech therapist, physical therapist, behaviour specialist special education consultant
	☐ None required at this time

Assessment Data (Specialized Assessment Results)

Date	Test	Results
November 2004	Vineland Adaptive Behavior Scale Test of Non-verbal Intelligence, Third Edition (TONI-3)	Reports affirm cognitive functioning in the moderate range.

Current Level of Performance and Achievement	Year-end Summary
September	June
 May 2006 teacher observation and checklists Amina enjoys sharing her lunch hours with the teacher assistants; however, she is shy around age peers. Peer interaction is developing slowly and Amina continues to benefit from having social interactions mediated by the teacher assistants. Amina's motivation to read increased during the year as she modelled the actions of her Grade 6 reading buddy. Amina's self help skills have improved and she is able to eat and drink independently. Due to fine motor challenges, Amina has begun to use word prediction software and story starter templates to write stories. She has responded positively to the use of the computer and can now write a four sentence story. 	
Grade Level of Achievement Reporting	nformation
☐ Adapted programming (graded curriculum)	
☐ Modified programming (not graded curriculu	
If student is on a modified program, indicat relative to each goal category:	e category of each goal and achievement level
 foundational skills (e.g., communication skills) 	ns, classroom behaviour, gross and fine motor
Goals achieved: ☐ all ☐ most	☐ some ☐ none ☐ not applicable
outcomes in the programs of study in Gr Goals achieved: □ all □ most • life skills (e.g., skills that will assist the home, school and community)	□ some □ none □ not applicable student in developing independence in the
Goals achieved: all most	□ some □ none □ not applicable

Long-term Goal: Amina will maximize her residual hearing through amplification (hearing aids and FM systems).

Short-term Objectives	Assessment Procedures	Progress Review
By December, Amina will discriminate between the presence and absence of a spoken syllable or word in a quiet environment. Amina will respond correctly on 40 consecutive presentations.	teacher/teacher assistant observations recorded on checklist	
By June, Amina will discriminate between familiar environmental sounds that are interrupted (car horn) versus continuous (vacuum cleaner) in a quiet environment 80% of the time.	teacher/teacher assistant observations recorded on checklist	

Accommodations and strategies to support objectives

 Encourage and model correct articulation of new vocabulary and facilitate carry-over speech skills into everyday speech in the classroom.

Long-term Goal: Amina will play and work appropriately with her peers.

Short-term Objectives	Assessment Procedures	Progress Review
By October, Amina will, verbally and in actions, show pride in her school work 80% of the time.	teacher/teacher assistant observation sociogram anecdotal notes	
By the end of November, Amina will demonstrate appropriate classroom manners 80% of the time.	teacher/teacher assistant observation checklist based on classroom rules	en promote and participate and a to the total and the second and t
By mid January, Amina will make at least three positive comments during a 15 minute classroom discussion on five of seven occasions.	teacher/teacher assistant observation checklist	
By June 30, Amina will make two positive comments about her peers when she works in a small group on three of four occasions.	teacher/teacher assistant observation checklist anecdotal notes sociogram	

- Schedule teacher assistants to provide direct supervision when Amina is in the hallways, physical
 education class and on the playground.
- Increase use of computer software to support development of social problem-solving skills.
- Encourage and model age-appropriate social interactions using spoken language.

Long-term Goal: Amina will demonstrate awareness of addition and subtraction.

Short-term Objectives	Assessment Procedures	Progress Review
By November 30, Amina will use manipulatives to add and subtract whole numbers where the maximum sum is 9, using a place value chart, with 80% accuracy on ten problems.	teacher/teacher assistant observation checklist teacher made tests	
By the end of February, Amina will use manipulatives and a place value chart to add and subtract whole numbers to 12, with 80% accuracy on ten problems.	 teacher/teacher assistant observation checklist teacher made tests 	
By April 30, Amina will use diagrams and symbols to demonstrate the process of addition and subtraction of whole numbers, where the maximum sum is 9, with 80% accuracy on ten problems.	teacher/teacher assistant observation checklist teacher made tests	
By the end of June, Amina will use diagrams and symbols to demonstrate the process of addition and subtraction of whole numbers, where the maximum sum is 12, with 80% accuracy on ten problems.	teacher/teacher assistant observation checklist teacher made tests	

- Provide instruction in a variety of ways (hands-on, visual, multi-sensory).
- Provide manipulatives and models during all mathematics classes.
- · Have well-lighted teaching/small group work areas.
- Individualize all tests and allow extra time.

Planning for Transition

- Angel Young will arrange for three case conferences during the year to involve all learning team
 members to review Amina's IPP goals and objectives as well as updating any assessment
 information that becomes available during the school year.
- Mr. and Mrs. Khan would like to visit a district senior elementary special education class to determine if that might be a more appropriate placement in which Amina could receive more focused instruction in sign language.
- Angel Young and Donna Major will arrange for assessment and consultation service referrals to be made in January 2007 for functional assessments to assist with programming for 2007/2008.

Additional Information	
Signatures	
I understand and agree with the information contained in this	Individualized Program Plan.
Amy Khan John Khan Parents	September 12, 2006 Date
IDD 0	September 12, 2006
IPP Coordinator/Teacher	Date
Mr. T.M. Rury	Contember 12, 2006
Ms. I.M. Busy Principal	September 12, 2006 Date

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Severe Physical or Medical Disability (Code 44)

Special Education Coding Criteria

A funded student with a severe physical, medical or neurological disability is one who:

- a) has a medical diagnosis of a physical disability, specific neurological disorder or medical condition which creates a significant impact on the student's ability to function in the school environment (note: some physical or medical disabilities have little or no impact upon the student's ability to function in the school environment);
 and
- b) requires extensive adult assistance and modifications to the education environment in order to benefit from schooling.

A student with severe autism (or other severe pervasive developmental disorder) is included in this category. A clinical diagnosis by a psychiatrist, registered psychologist, or medical professional specializing in the field of autism is required. A clinical diagnosis of autism is not necessarily sufficient to qualify under this category. Eligibility is determined by the functioning level of the student with autism.

In order for a diagnosis of autism to be made, the student needs to demonstrate impairment in the following areas:

- social interaction and
- communication, and
- exhibit stereotyped pattern of behaviour (e.g., hand flapping, body rocking, echolalia, insistence on sameness and resistance to change).

A student diagnosed with severe fetal alcohol spectrum disorder (FASD) may have fetal alcohol syndrome (FAS) or alcohol-related neurodevelopmental disorder (ARND) and is included in this category. A clinical diagnosis by a psychiatrist, registered psychologist with specialized training, or medical professional specializing in developmental disorders is required. A clinical diagnosis of FASD is not necessarily sufficient to qualify under this category. Eligibility is determined by the functioning level of the student with FASD. Students with severe FASD who exhibit significant impairment in the areas of social functioning, life skills, behaviour, learning, attention and concentration will need extensive intervention and support.

Questions and Answers

What documentation is required to determine students meet the special education coding criteria for severe physical or medical disability?

- A medical diagnosis of a physical, medical or neurological disability dated within the last three years.
- Once it is established by the school authority that the student has a chronic disability
 that has not changed significantly, a current functional assessment that
 demonstrates the impact of the student's disability while at school may be sufficient.
 Such functional assessments may be obtained from one of the Regional Educational
 Consulting Service providers (REACH, CASE, Edmonton Regional Educational
 Consulting Services, RÉSEAU) or other personnel specializing in the field.

What are some examples of severe medical or physical disabilities?

Students who are diagnosed with the following may meet the criteria for Code 44, depending upon the severity of the impact in the educational setting:

- Tourette syndrome
- cerebral palsy
- · fetal alcohol spectrum disorder
- · autism spectrum disorder
- brain injury
- cancer

What documentation is required to confirm a severe autism spectrum disorder?

- A clinical diagnosis by a psychiatrist, registered psychologist, or medical professional specializing in the field of autism.
- A functional assessment and anecdotal information that documents such aspects of the instructional environment as setting, instructional context and interpersonal factors that may affect the student's performance, as well as the strengths and needs of the individual student. Individuals with ASD may demonstrate difficulties with:
 - processing verbal and abstract information
 - regulating attention
 - generalizing
 - motor planning
 - transitioning between activities, settings and individuals
 - accommodating some forms of sensory experience
 - organizing and self-regulating.

What documentation is required to confirm a severe fetal alcohol spectrum disorder?

- A clinical diagnosis by a medical professional or diagnostic medical team specializing in the field of fetal alcohol spectrum disorders.
- A functional assessment and anecdotal information that documents such aspects of the instructional environment as setting, instructional context and interpersonal factors that may affect the student's performance, as well as the strengths and needs of the individual student. Individuals with FASD may demonstrate difficulties with:
 - academic learning
 - memory in the areas of short term recall and long term retrieval of information and directions
 - language such as interpreting figurative language and social situations, and producing complex sentence structures in speech and written language
 - developing complex, abstract thinking and reasoning
 - maintaining appropriate attention and focus
 - adaptive skills and social emotional functioning, which are be delayed relative to chronological age peers

What other supporting documentation relevant to the student's disabling condition and programming requirements may be included with the student package for monitoring by Alberta Education?

- Cognitive assessment reports, speech-language therapy reports, occupational therapy reports, physical therapy reports (as required)
- · Any current, relevant medical reports

For additional information, please refer to the case study on pages 49 to 59.

2007/2008 Severe Disabilities Re-alignment (Jurisdictions only)

Student File Requirements—Code 44 Submit a copy of each of the following documents:	
 □ diagnosis of a physical, medical or neurological disability □ specialized assessment report and/or medical report and/or functional assessment report completed between September 1, 2002 and September 30, 2007 	
☐ Individualized Program Plan 2006/2007 or 2007/2008 for new or recently identified students	
□ Alberta Education Student Monitoring Form Severe Disabilities Funding 2007/2008	

Case Study — Cheng

Background information, description of severe disabling condition(s)	 Cheng is a twelve-year-old student in Grade 6. Dr. Gold, psychiatrist, ABS Hospital, diagnosed Cheng with severe autistic disorder in November 1999. Cheng has extreme difficulties with: social interaction and with peers expressive/receptive communication Cheng exhibits stereotypic behaviours, specifically hand-flapping and pulling his hair. He is easily upset when not prepared for changes in routine/transitions. Cheng uses some picture communication symbols to enhance communication (expressive and receptive). Cheng requires assistance to develop more appropriate social interactions with peers and adults.
Current supports/services in place	 Cheng receives support for language arts and math, in a small group work setting (with 2 other students) for 2 hours daily. Cheng's teacher has 5 hours of Educational Assistant/Teacher Assistant support for the development of academics in the classroom setting. teacher assistant supervision is provided before school and during recess and lunch. Cheng's learning team monitors and records his behaviours daily, which include: initiated social interactions use of oral communication and communication board temper outbursts obsessive-compulsive behaviours. Members of the RECS team provide on-going behaviour communication consultative support. Cheng's teachers and staff meet bi-monthly with his parents and home support worker to review his program.
Individualized Program Plan	 Cheng's IPP was developed with his learning team, including his parents, RECS consultants and school staff. His IPP reflects Cheng's need for routine and identifies goals for communication, social/behaviour and academic progress.



Student Monitoring Form Severe Disabilities Funding 2007/2008

	PLEASE CHECK CODE
4	Severe Cognitive
4	2 Severe Emotional/Behavioural
4	3 Severe Multiple
X 4	4 Severe Physical or Medical, including Autism
4	5 Deafness
4	Blindness

School Authority	GHI Authority			
School Valley Sch	hool			
Student Name Che	eng			
Alberta Student Nur	mber (ASN)	XXXXXXXX		
Birth date (yy/mm/d	d) 94/12/1	6	Grade	6
Placement (describe	e) Regular g	rade classroom – 20 students	,	

1. Supporting documentation from the appropriate professional(s) (please attach copies):

Diagnosis	Year of Diagnosis	Professional Conducting Assessment
Severe autistic disorder	November 1999	Dr. Gold
	updated June 2006	

Additional assessment information (please attach copies):

•	March 2006: functional assessment	Report attached
•	May 2006: Gates-McGinitie Reading Comprehension	Report attached
•	May 2006: Gates-McGinitie Spelling	Report attached
•	May 2006: Key Math	Report attached
•	April 2006: Peabody Individual Achievement Test (PIAT)	Report attached
•	September 2006: Alberta Diagnostic Reading Test	Report attached
•	May 2005: Leiter International Performance Scale: Revised	Report attached
•	2005: Stanford Binet Intelligence Scale: Fifth Edition (SB-V)	Report attached

2. How does the condition/disability impact the student in the learning environment?

Difficulties with social interaction; expressive/receptive communications; stereotypical behaviours; compulsive and obsessive behaviours; preoccupation with Star Trek III.

	Services provided in accordance with the <i>Funding Manual for School Authorities 2007-2008 School Year</i> . Identify three or more of the following supports from (a) to (e) that are being provided to the student:
	a) Frequent specialized one-on-one intervention provided during 2007/2008:
	specialized setting with teacher small group work with teacher and/or teacher assistant small group work with teacher and/or teacher assistant decorate the contraction of the contra
	b) Specialized equipment and/or assistive devices provided during 2007/2008:
	X communication devices OT/PT equipment assistive technology/devices specialized furniture sound field amplification personal FM system other (specify) specialized software
	c) Assistance with personal care/health-related interventions provided during 2007/2008: assistance with personal hygiene lifts and transfers feeding program oxygen administration oxygen administration ye-tube feeding management of equipment OM training mobility training (wheelchair, walker)
	d) Frequent documentation of behavioural and/or medical status during 2007/2008:
	X Behaviour X checklist X anecdotal notes X behaviour plan other
	Execution of the State of the S
	Frequency → X hourly X daily weekly monthly Medical medical logs medical emergency plan other
	Frequency → X hourly X daily weekly monthly Medical medical logs medical emergency plan frequency → hourly daily weekly monthly
	Medical medical logs medical emergency plan other
	Medical medical logs medical emergency plan other Frequency → hourly daily weekly monthly e) Direct support services for the student at a cost to the system during 2007/2008: e.g., Regional Educational Consulting Service teams: (REACH, CASE, ERECS, RESEAU), Student Health Partnership.
4.	Medical medical logs medical emergency plan other Frequency ★ hourly daily weekly monthly e) Direct support services for the student at a cost to the system during 2007/2008: e.g., Regional Educational Consulting Service teams: (REACH, CASE, ERECS, RESEAU), Student Health Partnership. Services must be provided to the individual student on a regularly scheduled basis. itinerant teacher
4.	Medical medical logs medical emergency plan other Frequency → hourly daily weekly monthly e) Direct support services for the student at a cost to the system during 2007/2008: e.g., Regional Educational Consulting Service teams: (REACH, CASE, ERECS, RESEAU), Student Health Partnership. Services must be provided to the individual student on a regularly scheduled basis. iitinerant teacher

DECLARATION Relevant assessment documentation to support the claim is available, at least three of five supports listed in 3 (a-e) are in place, a current IPP is included in the student's file, and the student meets the Severe Disabilities Funding criteria.	
Date	Signature of School Authority Designate

Individualized Program Plan

Student Information

Student: Cheng

Date of Birth: 12/16/1994 **Age as of Sept. 1/2006:** 12

Parents: Liang & Bo Date I.P.P. Created: September 2006

Address: Phone #:

Eligibility Code: 44

Year of School/Grade: Grade 6

Background information: Classroom context

School: Valley School, GHI Authority

I.P.P. Coordinator and Classroom Teacher: P. O'Grady

Additional IPP Team Members: W. Mathews, school administrator

Liang & Bo, parents
J. Reiche, resource teacher
G. Eady, teacher assistant

R. Lannigan, speech-language pathologist

S. Ellis, home support worker A. Holt, behaviour consultant

Background Information: Parental input and involvement

Cheng's parents are very involved in the identification of IPP goals. They are especially interested in supporting the development of more appropriate classroom behaviours and using communication strategies consistently at home in order to reduce Cheng's frustration.

Strengths

- · follows instructions with visual prompts
- · uses word processing programs for writing
- uses a timer to monitor on-task behaviour
- uses visual schedule to prepare for changes

Areas of Need

- to develop increased independence at school
- · to learn to cope with transitions
- to learn to calm himself when anxious
- to develop more appropriate social behaviours

Medical Conditions that Impact Schooling	Coordinated Support Services	
No current medical conditions that impact schooling	 Teacher assistant — G. Eady Classroom teacher — P. O'Grady Communication consultant — R. Lannigan Home support worker — S. Ellis Behaviour consultant — A. Holt None required at this time	

Assessment Data (Specialized Assessment Results)

Date	Test	Results
May 2005	Leiter International Performance Scale: Revised Stanford Binet Intelligence Scale: Fifth Edition (SB-V)	Nonverbal reasoning skills appear to be approximately two years delayed. Assessment with the SB-V was attempted and discontinued. Psychologist felt that Cheng's verbal reasoning skills and oral skills were considerably weaker than his nonverbal skills.
April 2006	Peabody Individual Achievement Test (PIAT)	Cheng's performance was very inconsistent. His decoding skills were somewhat stronger than his comprehension skills but his articulation problems made it difficult to understand all of his responses.
March 2006	Functional behaviour and communication assessments	Cheng displays abnormal language development and social interaction, unusual interests, self-stimulatory behaviours, obsessive compulsive behaviours and resistance to change, all of which are consistent with his diagnosis of severe autism.

Current Level of Performance and Year-end Summary Achievement September June Cheng can follow simple written/drawn Cheng has demonstrated gains in his instructions that are accompanied by familiar understanding and use of oral and visual language patterns or examples. communication strategies over the year. Cheng enjoys writing stories using a word Cheng will use his picture schedule with a processor with word prediction. He can write verbal prompt about half of the time. The rest stories of up to 5 sentences. of the time, he still requires physical prompts. Cheng is developing independent skills Cheng requires visual prompts to attempt word problems. He refuses to attempt (supported by visual scripts) to work in the classroom and is less reliant on the teacher geometry problems. Alberta Diagnostic Reading Test: Cheng has mastered using his red/green Cheng relies primarily on a sight word symbol to indicate desire for attention and approach although he does seem to be desire to be left alone. developing some phonological awareness. Cheng can answer very simple Cheng is beginning to use his portable comprehension questions involving literal schedule to support himself in transitioning recall. between activities throughout the school (e.g., at recess, lunch, gym). **Grade Level of Achievement Reporting Information** ☐ Adapted programming (graded curriculum) ■ Modified programming (not graded curriculum) If student is on a modified program, indicate category of each goal and achievement level relative to each goal category: foundational skills (e.g., communications, classroom behaviour, gross and fine motor skills) Goals achieved: ☐ all ☐ most ☐ some ☐ none ☐ not applicable academic readiness skills (e.g., readiness skills to prepare student for learning outcomes in the programs of study in Grade 1 and subsequent grade levels) Goals achieved: ☐ all ☐ most ☐ some ☐ none □ not applicable life skills (e.g., skills that will assist the student in developing independence in the home, school and community) Goals achieved: □ all ☐ most ☐ some ☐ none not applicable

Long-term Goal: Cheng will use oral and visual communication strategies to achieve his desires and function more independently in the classroom and at home.

Short-term Objectives	Assessment Procedures	Progress Review
By November, with a physical prompt, Cheng will use a detailed picture schedule to follow the class routine in four out of four class periods for four consecutive days.	teacher/teacher assistant observation parent observation (home)	achieved At home, Cheng uses his picture schedule (scripted with PCS for dinner routines) with verbal prompts.
By February, with a verbal prompt, Cheng will use a detailed picture schedule to follow the class routine in four out of four class periods for four consecutive days.	teacher/teacher assistant observation and documented records	With a verbal prompt, Cheng will complete his work independently, follow the instructional routine for the assignment and return his work to the "finished basket" about half the time. He still requires a physical prompt the rest of the time.
By April, Cheng will use his choosing book paired with oral language to support 85% of his communication attempts in the classroom.	teacher/teacher assistant observation	Emerging: Cheng will use his choosing book to express his wants.
By June report card, when using his choosing book for communication support, Cheng will: a) select and verbalize five appropriate social script sentences to interact with a peer during partner or small group work on three out of five occasions b) orient himself toward and attend to a peer's attempt to reply using the choosing book.	teacher/teacher assistant observation and documentation	Requires prompting Attends to a peer's attempt but does not respond back or initiate further exchange

- Provide instruction in a variety of ways (e.g., hands on, visual, multisensory).
- Use a daily communication book between home and school.
- Use visual cues and visually scripted instructional routines (drawings, picture communication symbols) to support Cheng's learning.
- Provide instructional opportunities for Cheng to make choices in the classroom.
- Provide a verbal cue paired with a visual cue prior to transitions between activities.

Long-term Goal: Cheng will further develop his functional academic skills in reading and math.

Short-term Objectives	Assessment Procedures	Progress Review
By November, when using the classroom computer and his personal dictionary, Cheng will write and illustrate sentences using five new words per week.	teacher observation of written product checklist of sight words in personal dictionary	achieved
By mid January, when silently reading a series of short instructional level passages, Cheng will be able to recall (in written form using the class computer) two details in two of three passages.	teacher will select passages from computer software reading program teacher assistant will measure criteria and document progress	achieved
By March Break, when given math word problems, Cheng will select the correct strategy card for solving one-step problems on 8 out of 10 attempts.	teacher provides problem sheets; teacher assistant will monitor and document strategy selection	achieved; create strategy cards for two-step problems
By May, when silently reading a series of short instructional level passages, Cheng will be able to sequence pictures of the story events in three of four passages.	teacher selects passages and sequence cards teacher assistant will measure criteria and record progress	• achieved

- Provide instruction in a variety of ways (e.g., hands on, visual, multisensory).
- Use a daily communication book between home and school.
- Use visual cues and visually scripted instructional routines (drawings, picture communication symbols) to support Cheng's learning.
- Provide instructional opportunities for Cheng to make choices in the classroom.
- Provide a verbal cue paired with a visual cue prior to transitions between activities.

Long-term Goal: Cheng will develop increasing control of compliant and positive behaviours in order to achieve his desires.

Short-term Objectives	Assessment Procedures	Progress Review
By October, when a self-calming strategy is modelled, Cheng will imitate the demonstrated routine on 70% of opportunities.	teacher assistant models and monitors token reinforcers and documents progress	achieved
By November, when working independently in the classroom, Cheng will use a visual cue card to signal his request for adult attention or his desire to be left alone on 50% of opportunities.	teacher/teacher assistant observation and documentation	achieved; increase to 75% use by June
By the end of January, when prompted verbally and paired with a visual cue, Cheng will initiate a self-calming strategy 50% of the time.	teacher/teacher assistant observation and documentation	achieved
By March break, when working on assignments, Cheng will use a visual cue card to signal when he needs a break on 60% of opportunities.	teacher/teacher assistant observation and documentation	 Emerging: Cheng uses his break card 40% of the time. When frustrated, Cheng refuses to do a task rather than ask for help or a break. Continue to model and reinforce use of the break card before seeing signs of agitation.
By June 15, when anxious or frustrated, Cheng will use his calming strategy 75% of the time without prompting.	teacher/teacher assistant observation and documentation	Cheng requires verbal prompts to use his calming strategy 100% of the time.

- Provide instruction in a variety of ways (e.g., hands on, visual, multisensory).
- Use a daily communication book between home and school.
- Use visual cues and visually scripted instructional routines (drawings, picture communication symbols) to support Cheng's learning.
- Provide instructional opportunities for Cheng to make choices in the classroom.
- Provide a verbal cue paired with a visual cue prior to transitions between activities.
- Provide modeling and explicit instruction in social skills strategies (e.g., visually scripted peer interactions).

Planning for Transition

- Cheng will continue to need a computer next year in junior high, so arrangements for portable technology should be explored by June 1, 2007.
- The junior high resource teacher has already visited with Cheng and observed him in the classroom and playground settings.
- A volunteer peer helper from Grade 7 will visit Cheng in June and accompany him and his mother
 on two visits to the junior high school.
- Arrangements will be made for the same volunteer peer helper to participate in some activities with Cheng next year as part of the peer helper program.
- During Grade 7, Cheng's IPP team and parents will help Cheng explore areas of strength for future vocational and community participation.

Goals and Objectives Requiring Ongoing Focus

- Cheng uses his choosing book enthusiastically, but he occasionally fails to comprehend that he
 must follow through with his choices. This needs re-teaching and reinforcement to firm up skill and
 understanding.
- When anxious, Cheng still uses disruptive behaviours about 50% of the time (yelling, banging).
 Cheng's parents will continue to reinforce Cheng's use of self-calming strategies and visual communication strategies over the summer. Before September, a meeting will be arranged to discuss effective reinforcers for calming time.
- Continued focus on developing functional reading and writing skills.

Strategies That Worked Well

- Instructional routines (scripted with PCS) facilitated Cheng's independence in the classroom.
- Colour coding assignment folders and providing colour coded "finished baskets" for finished work were effective in helping Cheng find, organize and return his work.
- Visual cues supported Cheng's communication and positive behaviours while participating in activities.
- Cheng willingly used the computer reading programs.
- The choosing book is an effective system for enhancing Cheng's receptive and expressive communication.

Support Services Required

Teacher assistant support to continue at the present level for the 2006/2007 school year then re-evaluate

Recommendations

- Set up a classroom quiet area and provide strong positive reinforcement when Cheng asks appropriately to use the quiet area.
- Maintain close communication and coordination of strategies between home and school to maintain consistency.
- Suggested focus for the Grade 7 year: help Cheng develop coping skills for new challenges in the
 junior high school environment (e.g., changing classes, use of lockers, multiple teachers, and
 increase functional reading and writing skills).

Additional Information

Deafness (Code 45)

Special Education Coding Criteria

A funded student with a severe to profound hearing loss is one who:

- a) has a hearing loss of 71 decibels (dB) or more unaided in the better ear over the normal speech range (500 to 4000 Hz) which interferes with the use of oral language as the primary form of communication, or has a cochlear implant preceded by a 71 dB hearing loss unaided in the better ear; and
- b) requires extensive modifications and specialized educational supports; and
- c) has a diagnosis by a clinical or educational audiologist. New approvals require an audiogram within the past 3 years.

If a student has a severe to profound sensorineural hearing loss that has not changed significantly since the initial approval by Alberta Education, documentation from a qualified specialist in the field of deafness outlining the severity of the hearing loss and modifications to the learning environment may be sufficient to support eligibility.

Questions and Answers

What are the main characteristics of a student with a severe to profound hearing loss?

- Hearing loss of 71 dB or more unaided in the better ear over the normal speech range on an audiogram.
- The primary form of communication may be an oral approach and/or sign language (e.g., Signed English and/or American Sign Language).
- Requires extensive modifications and specialized educational supports.

What documentation is required for eligibility?

- An audiogram from an audiologist must be in the student's file. If a student has a severe to profound hearing loss that has not changed significantly, an updated audiogram is not necessary.
- A recent functional assessment from personnel specializing in the field of deaf and hard of hearing, e.g., Regional Educational Consulting Service teams (REACH, CASE, ERECS, RÉSEAU), may be sufficient for programming purposes. A functional assessment report specifies the amount and type of personal assistance, specialized programming, equipment and/or communication access required by the student.

Hearing level classification equivalents:

Descriptor	Decibel (dB) range (how loud a sound must be in order to be heard)
Normal hearing for children	0-15 dB
Minimal loss	16-25 dB
Mild loss	26-40 dB
Moderate loss	41-55 dB
Moderate-severe loss	56-70 dB
Severe loss	71-90 dB
Profound loss	90 + dB

What other supporting documentation relevant to the student's disabling condition and programming requirements may be included with the student package?

- Additional reports from hearing specialists, speech-language therapists, or other professionals working with the student
- · Current relevant medical reports
- Any documentation, including anecdotal records, reflecting the student's needs in the learning environment.

For additional information, please refer to the case study on pages 62 to 74.

2007/2008 Severe Disabilities Re-alignment (Jurisdictions only)

Student File Requirements—Code 45 Submit a copy of each of the following documents:		
☐ diagnosis of a severe to profound hearing loss supported by an audiogram from an audiologist		
specialized assessment report and/or medical report and/or functional assessment report completed between September 1, 2002 and September 30, 2007		
☐ Individualized Program Plan 2006/2007 or 2007/2008 for new or recently identified students		
□ Alberta Education Student Monitoring Form Severe Disabilities Funding 2007/2008		

Case Study — Lukina

Background information, description of severe disabling condition(s)

- Lukina is a nine-year-old girl in a regular Grade 4 classroom.
- Lukina has a congenital severe sloping to profound, binaural (involving both ears) sensorineural hearing loss, diagnosed at age 16 months by Rob Ring, audiologist, in September 1998. There has been no significant change in Lukina's hearing.
- Shortly after diagnosis, Lukina began speech therapy.
 It was discontinued at the end of last school year.
- Beginning when she was about 3 years old, Lukina attended a preschool designated for children with hearing loss. Her parents choose an oral/aural approach in combination with sign language as the mode of communication.
- Lukina's articulation is difficult to understand but intelligible to those who know her.
- Assessments by S. Town, RECS hearing consultant, confirmed academic, language and sign language skills delays. She provided programming recommendations in May 2006.
- Lukina continues to use a combination of oral and sign language as her primary mode of communication at home and at school.

Current supports/services in place

- Lukina's teacher has access to an educational audiologist and education consultant for deaf and hard of hearing to support Lukina's educational programming.
- The RECS consultant for deaf and hard of hearing supports Lukina in her school program and assists the teacher and other staff in the development and implementation of her IPP.
- Lukina's learning environment and presentation of materials are modified and/or adapted to address her communication and academic needs.
- Lukina is supported throughout the day by a qualified sign language interpreter, including recess and lunch breaks.
- Lukina has access to a computer for additional literacy/communication support.

Individualized Program Plan

- Lukina's IPP was developed with the learning team, which consists of her parents, teacher(s), consultant for deaf and hard of hearing, and school administrator.
- Measurable goals are identified to address Lukina's language, communication, literacy and social/emotional needs. The IPP identifies assessment data, current level of performance and achievement, her strengths, needs, procedures for evaluating student progress, coordinated supports, teaching/classroom adaptations including additional program supports, transition plans and year-end summary.



Student Monitoring Form Severe Disabilities Funding 2007/2008

	PLEASE CHECK CODE
41	Severe Cognitive
42	Severe Emotional/Behavioural
43	Severe Multiple
44	Severe Physical or Medical, including Autism
X 45	Deafness
<u> </u>	Blindness

20	07/2008	46 Bli	indness
Sch	nool Authority Vista Authority		
	nool South School		
Stu	dent Name Lukina		
٩lb	erta Student Number (ASN) XXXXXXX	ΚΧ	The state of the s
3ir1	th date (yy/mm/dd) 97/05/12		Grade 4
Pla	cement (describe) Included in regular G	rade 4 classroom	
1.	Supporting documentation from the app	propriate professi	onal(s) (please attach copies):
		Year of	
	Diagnosis	Diagnosis	Professional Conducting Assessment
	Congenital severe sloping to profound, binaural	September 1998	Rob Ring, Audiologist
Additional assessment information (please attach copies): May 2006: update for programming by S. Town, RECS hearing consultant April 2005: Test of Written Language-Third Edition (TOWL-3) — well below average on all subtests March 2006: Gates-McGinitie Reading Comprehension Test — 20th Percentile October 2004: Raven's Standard Progressive (RSP) Matrices — Average range IQ June 2004: K-Bit — Below average IQ (verbal only) 2. How does the condition/disability impact the student in the learning environment? Lukina has academic, language, communication and literacy delays. Lukina uses an oral approach in combination with a sign language interpreter to access information and to communicate. 3. Services provided in accordance with the Funding Manual for School Authorities 2007-2008 School Year. Identify three or more of the following supports from (a) to (e) that are being provided to the student: a) Frequent specialized one-on-one intervention provided during 2007/2008:			
	specialized setting with teacher small group work with teacher and/or teacher assistant interpreter other (specify) b) Specialized equipment and/or ass communication devices assistive technology/devices		(hours per day); (staff:student ratio) 6 (hours per day); 1:1 (staff:student ratio)
	sound field amplification other (specify)		personal FM system
		L	7 Opening of the state of the s

c) Assistance with personal care/health-related interventions provided during 2007/2008:			
administration of medication O&M train	y therapy Oxygen administration onent of equipment OT/PT therapy		
Behaviour checklist anecdotal notes behaviour plan other Frequency → hourly daily weekly monthly			
Medical medical logs medical e Frequency → hourly	mergency plan other monthly		
	cost to the system provided during 2007/2008: ACH, CASE, ERECS, RESEAU), Student Health Partnership. agularly scheduled basis.		
occupational therapist physical t	ultant nursing services psychologist X audiologist		
4. Individualized Program Plan (IPP) is in place for 2007/2008:			
X The current IPP identifies the assessed needs of programming to address those needs.	f the student and includes specific educational		
X This IPP has been developed, implemented and signed by the learning team, including the parent/guardian.			
DECLARATION Relevant assessment documentation to support the supports listed in 3 (a-e) are in place, a current IPP is student meets the Severe Disabilities Funding criteri	included in the student's file, and the		
September 28, 2006	M. Símpson		
Date	Signature of School Authority Designate		

Individualized Program Plan

Student Information

Student: Lukina

Date of Birth: 05/12/1997 Age as of Sept. 1/2006: 9-4

Parents: Mr. and Mrs. Parent Date I.P.P. Created: September 2006

Address: Phone #:

Eligibility Code: 45

Year of School/Grade: 4

Background information: Classroom context

School: South School

I.P.P. Coordinator and Classroom Teacher: A. Parsons

Additional IPP Team Members: M. Simpson, principal

Mr. & Mrs. Parent, parents

S. Town, RECS consultant for deaf and hard of hearing

J. Panwhar, special education consultant

P. Gaudet, interpreter
D. Jones, school counsellor

Background Information: Parental input and involvement

- Lukina and her family communicate using a combination of speech and sign language. Lukina's
 parents are very involved with her education and supportive of the school.
- Lukina has support from a trained sign language interpreter (e.g., class activities and communication from staff and students, recess, field trips).
- Results of the September 2006 psycho-educational assessment will assist in the development of Lukina's IPP to ensure that she is presented with materials at the appropriate level and to identify effective strategies.
- Currently, the consultant for the deaf and hard of hearing has recommended that the teacher(s)
 refer to Book 4 of Alberta Education's Programming for Students with Special Needs Series:
 Teaching Students Who Are Deaf or Hard of Hearing for strategies and programming
 considerations. Lukina's learning team developed the IPP.
- The school counsellor meets with Lukina to discuss her self-image, self-esteem and self-confidence.

Strengths

- enjoys playing sports
- supportive family
- math computation
- willingness to try new things
- · enjoys hands-on activities
- friendly and outgoing

Areas of Need

- sign language vocabulary (expressive and receptive) and fluency skills
- communication repair skills
- keyboarding skills
- · English literacy skills
- · focusing his visual attention where/when needed
- greater independence in completing all academic assignments

Medical Conditions that Impact Schooling	Coordinated Support Services
Congenital severe sloping to profound sensorineural binaural hearing loss; no auditory access to oral information No current medical conditions that impact schooling	S. Town, RECS consultant for deaf and hard of hearing J. Panwhar, special ed. consultant P. Gaudet, interpreter D. Jones, school counsellor T. Smith, technology/computer software consultant
	☐ None required at this time

Assessment Data (Specialized Assessment Results)

Date	Test	Results
September 2006	P. Roberts, C. Psych., is scheduled to administer a formal psycho-educational assessment, including cognitive functioning, to Luki in early September 2006	ina

Current Level of Performance and Achievement	Year-end Summary		
September April 2006 Test of Written Language-3rd Edition (TOWL-3) • well below average on all subtests	June		
March 2006 Gates-McGinitie Reading Comprehension Test 20th percentile			
October 2004 Raven's Standard Progressive (RSP) Matrices high average range (non-verbal)			
June 2004 Kaufman Brief Intelligence Test (K-Bit) below average (verbal)			
Grade Level of Achievement Reporting Information			
☐ Adapted programming (graded curriculum)			
☐ Modified programming (not graded curriculum)			
If student is on a modified program, indicate category of each goal and achievement level relative to each goal category:			
 foundational skills (e.g., communication skills) 	ons, classroom behaviour, gross and fine motor		
Goals achieved: ☐ all ☐ most	☐ some ☐ none ☐ not applicable		
 academic readiness skills (e.g., readiness of study in General control of	ness skills to prepare student for learning rade 1 and subsequent grade levels) some Inone Inot applicable		
	student in developing independence in the		
home, school and community) Goals achieved:	□ some □ none □ not applicable		

Long-term Goal: Lukina will increase her receptive and expressive sign language vocabulary and subject area concepts at the level of her ability, with increased clarity of hand movements.

Short-term Objectives	Assessment Procedures	Progress Review
For each unit/theme for all subject areas, Lukina will learn a minimum of 15 new vocabulary words in sign, both receptive and expressive, with 100% accuracy at the end of each unit/theme.	teacher-prepared formal and informal assessment and records interpreter's observations regarding clarity of sign (hand movements) for others' understanding	At the completion of each unit/ theme for all subject areas.
Lukina will preview and review concepts in both written and signed form with her interpreter under the guidance of each subject teacher to raise her average in each subject area by at least 3% each reporting period.	teacher and interpreter observations and records formal and informal assessments of subject content	NovemberMarchJune
During social activities with deaf children and others who are learning to sign, Lukina will spontaneously engage in and respond positively to others' signed communication at least 80% of the time by the end of June.	teacher and interpreter observations and documentation	NovemberMarchJune

- Lukina receives pre-teaching and review of written and signed vocabulary when new content is introduced.
- The teacher and the interpreter must pre-determine which words will be included when Lukina has oral spelling tests so signs (not fingerspellling) are used, and if she is required define vocabulary, the interpreter uses signs that do not identify the concept/meaning.

Long-term Goal: Lukina will learn and utilize effective and age-appropriate communication repair strategies.

Short-term Objectives	Assessment Procedures	Progress Review
By the end of June, with no prompting, Lukina will effectively use at least three effective communication repair strategies in 75% of the opportunities.	observation and documentation by the interpreter, teacher and consultant for deaf and hard of hearing	weekly
By June, Lukina will appropriately indicate when she needs communication rescue from the interpreter, after making at least two independent attempts to repair the communication breakdown in 85% of the opportunities.	observation and documentation by the interpreter and consultant for deaf and hard of hearing	• weekly
- A.A CON-LOT MATERIAL STOP, AND LESS AND LESS AND TO CONTRACT AND AND LESS AND	eminimization all manus accommission destroyed experience and a last the first fire. See that the first	

Long-term Goal: Lukina will improve her ability to focus his visual attention appropriately.

Short-term Objectives	Assessment Procedures	Progress Review
By mid-June, Lukina will independently refocus her visual attention appropriately with no more than two prompts in at least 75% of the situations.	teacher, hearing consultant and interpreter observations and documentation	• daily
By mid-June, Lukina will ignore visual distractions, after a brief visual check, 75% of the time.	teacher, hearing consultant and interpreter observations and documentation	• daily
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- Lukina's seating is adjusted to ensure a clear line of vision to the speaker and/or interpreter who
 will stand or sit near to the speaker. This allows Lukina greater opportunity to see the facial
 expressions of the speaker as well as understand the oral communication. Ensure that the light
 source is on the face of the speaker and that Lukina's back is to the light source.
- The speaker provides pause time in oral communication when Lukina is required to read or observe a model/activity and then continues talking when Lukina resumes visual contact with the speaker. She cannot look at the activity/book, speaker and interpreter at the same time.

Long-term Goal: Lukina will improve her English literacy skills.

Short-term Objectives	Assessment Procedures	Progress Review
Lukina will read stories with 80% comprehension at mid Grade 2 level by March 2007	comprehension activities from the classroom reading series	weekly
By June, Lukina will write an average of one creative writing story each week with an 80% accuracy using conventions and sentence structure at the early Grade 2 level.	teacher formal and informal assessment TOWL-3	• weekly
Conthinus e primining de historistica entre entre province de trias also accedentificada autoristica	CONTRACTOR AND THE STANDARD STORMS AND STANDARD STANDARD STANDARD AND AND AND AND AND AND AND AND AND AN	the sub-sub-sub-sub-sub-sub-sub-sub-sub-sub-

- Much of Lukina's individualized language arts instruction, assignments and extra practice can be done with computer software support.
- A home-reading program with the parents will be implemented.
- Lukina will have access to a computer for academic support and communication support when applicable.

Long-term Goal: Lukina will demonstrate greater independence in starting and completing academic assignments.

Short-term Objectives	Assessment Procedures	Progress Review
By December, Lukina will begin her work within two minutes of being instructed to begin with no prompts 50% of the time.	teacher and interpreter observation and documentation	daily
By June, Lukina will work independently at the appropriate assignment for at least 10 minutes before requesting help, 75% of the time.	teacher and interpreter observation and documentation	daily

Accommodations and strategies to support objectives

• Use of captioned videos when available.

Planning for Transition

- In June, the Grade 5 teacher(s) will meet with the Grade 4 teacher(s), parents, interpreter, consultant for deaf and hard of hearing, and educational audiologist to provide information regarding Lukina's programming, accommodations and progress. Identify the learning team and each member's role for Grade 5.
- The Grade 5 teacher, the consultant for deaf and hard of hearing, and the educational audiologist
 will determine a tentative schedule of visits for the following year.
- The FM system is checked by the audiologist and sent for maintenance if necessary.
- Provide parents with contacts and organizations which may allow interaction with other signing deaf students as well as signing deaf adult role models.

Additional Information	
Signatures	
I understand and agree with the information contained i	in this Individualized Program Plan.
Parents	_ Date
IPP Coordinator/Teacher	- Date
Principal	Date

Blindness (Code 46)

Special Education Coding Criteria

A funded student with severe vision impairment is one who:

- a) has corrected vision so limited that it is inadequate for most or all instructional situations, and information must be presented through other means; and
- b) has visual acuity ranging from 6/60 (20/200) in the better eye after correction, to having no usable vision or field of vision reduced to an angle of 20 degrees.

If a student has a severe to profound visual impairment that has not changed significantly since the initial approval by Alberta Education, documentation from a qualified specialist in the field of vision outlining the severity of the disability and modifications to the learning environment may be sufficient to support eligibility.

For those students who may be difficult to assess (e.g., cortical blindness – developmentally delayed), a functional visual assessment by a qualified specialist in the field of vision or a medical professional may be sufficient to support eligibility.

Questions and Answers

What are the main characteristics of a student with a severe visual disability?

- In order to participate fully within the educational environment, students who are blind or visually impaired require instruction in disability-specific skills. These include:
 - compensatory academic skills, including braille or alternate format materials such as large print or audio tape
 - orientation and mobility
 - social interaction skills
 - assistive technology such as screen readers
 - independent living or personal management skills
 - visual efficiency skills
 - recreation, leisure, career and life management skills.

What documentation is required for eligibility?

 Reports or results from a medical doctor, ophthalmologist, specialized teachers or other medical professionals specializing in the field, which document the severity of the disability, must be in the student's file.

What other supporting documentation relevant to the student's disabling condition and programming requirements may be included with the student package for monitoring by Alberta Education?

- Additional reports from specialized teachers, orientation and mobility specialists or other professionals working with the student
- Current relevant medical reports
- Any documentation, including anecdotal information, which reflects the student's needs in the learning environment.

For additional information, please refer to the case study on pages	77 to 86.

2007/2008 Severe Disabilities Re-alignment (Jurisdictions only)

Student File Requirements—Code 46 Submit a copy of each of the following documents:				
	diagnosis of a severe to profound vision impairment specialized assessment report and/or medical report and/or functional assessment report completed between September 1, 2002 and September 30, 2007			
	Individualized Program Plan 2006/2007 or 2007/2008 for new or recently identified students			
	Alberta Education Student Monitoring Form Severe Disabilities Funding 2007/2008			

Case Study — Shannon

Background information, description of severe disabling condition(s)	 Shannon is a nine-year-old Grade 4 student. She was diagnosed at age 2 in June 1999, with ocular albinism and nystagmus (involuntary movement of the eyes) by Dr. Lee, ophthalmologist. Visual acuity was recorded at that time as 6/60 in each eye. This is consistent with the definition of legal blindness. Shannon is of above average intelligence. An updated functional assessment in March 2006 by Tom Brown, specialized teacher, includes programming recommendations.
Current supports/services in place	 Consultation services for the visually impaired are provided on a bi-monthly basis. Shannon is provided with braille and tactile modifications, preferred seating and the use of assistive technology that includes magnification devices. Shannon receives orientation and mobility instruction bi-monthly from a qualified orientation and mobility instructor. Shannon is supported by a full-time teacher assistant whose primary responsibilities include: ensuring that all visual materials presented within the classroom environment are available to Shannon in an alternate format providing one-to-one assistance in the follow-up of braille instruction, including nemeth code providing follow-up and support for orientation and mobility needs providing support in the use of assistive technology.
Individualized Program Plan	 Shannon's IPP was developed in consultation with her learning team, which includes Shannon, her mother, teacher, specialized teacher, orientation and mobility specialist, and teacher assistant. The goals of her educational program reflect her needs for the development of specialized skills, including braille, orientation and mobility, and the use of assistive technology. Shannon's program goals also reflect the need for her to learn skills in the areas of personal grooming and care, social interaction and recreation. Shannon's primary medium for reading is braille, because of fatigue factors associated with print reading.



Student Monitoring Form Severe Disabilities Funding 2007/2008

	PLEASE CHECK CODE
41	Severe Cognitive
42	Severe Emotional/Behavioural
43	Severe Multiple
44	Severe Physical or Medical, including Autism
45	Deafness
X 46	Blindness

20	107/2008	A 46 Bi	indness
Scl	nool Authority XY Authority		
Scł	nool Battner School		
Stu	dent Name Shannon		
Alb	erta Student Number (ASN) XXXXXXX	XX	
	th date (yy/mm/dd) 97/06/30		Grade 4
	cement (describe) Grade 4 classroom		
	` <u></u>		in a Mahanana Manhananian N
1.	Supporting documentation from the app		ionai(s) (please attach copies):
	Diagnosis	Year of Diagnosis	Professional Conducting Assessment
	Ocular albinism; visual acuity 6/60 in both eyes after correction	June 1998	Dr. Lee
	Nystagmus	June 1998	Dr. Lee
- 2. - 3.	Tom Brown, specialized teacher – program How does the condition/disability impact Shannon is not able to access print and via requires instruction in using braille. Orient independence at school and in the commu- Services provided in accordance with the School Year. Identify three or more of to provided to the student: a) Frequent specialized one-on-one in	ct the student in the sual materials using the station and mobility unity. The Funding Manuals to following supposes the state of the	the learning environment? In g braille, CCTV and enlarged print. She training is ongoing in order to increase In all for School Authorities 2007-2008 In ports from (a) to (e) that are being
	specialized setting with teacher		(hours per day); (staff:student ratio)
	small group work with teacher and/or	r teacher assistant	
	X teacher assistant		6 (hours per day); 1:1 (staff:student ratio)
	interpreter		(hours per day); (staff:student ratio)
	X other (specify) O & M instruction a per month).	and braille instructi	on with teacher in specialized setting (8 hours
	b) Specialized equipment and/or ass	sistive devices pr	ovided during 2007/2008:
	communication devices		OT/PT equipment
	X assistive technology/devices	[>	specialized furniture
	sound field amplification		personal FM system
	X other (specify) brailler, magnification enlarged print, white c		specialized software

c) Assistance with personal care/health-related interventions provided during 2007/2008:			
catheterization respira	d transfers atory therapy gement of equipment raining	feeding program oxygen administration OT/PT therapy mobility training (wheelchair, walker)	
d) Frequent documentation of behavioural	and/or medical status d	uring 2007/2008:	
Behaviour checklist anecdotal r Frequency → hourly		other weekly monthly	
Medical medical logs medical frequency → hourly	al emergency plan	other monthly	
e) Direct support services for the student a e.g., Regional Educational Consulting Service teams: Services must be provided to the individual student or	(REACH, CASE, ERECS, RESI		
special education consultant ATL consultant register consultant register coccupational therapist physic	h therapist possultant ered psychologist al therapist I liaison worker	vision consultant nursing services audiologist behaviour specialist school counsellor	
 Individualized Program Plan (IPP) is in place for a superior of the current IPP identifies the assessed need programming to address those needs. 		des specific educational	
X This IPP has been developed, implemented parent/guardian.	and signed by the learning	g team, including the	
DECLARATION Relevant assessment documentation to support t supports listed in 3 (a-e) are in place, a current IPI student meets the Severe Disabilities Funding cri	P is included in the stud	least three of five lent's file, and the	
September 30, 2006	L.	Clark	
Date	Signature of School	ol Authority Designate	

Individualized Program Plan

Student Information

Student: Shannon

Parents: Mrs. Parent Date I.P.P. Created: September 2006

Address: Phone #:

Eligibility Code: 46

Year of School/Grade: 4

Background information: Classroom context

School: Battner School

I.P.P. Coordinator and Classroom Teacher: Mrs. Jones

Additional IPP Team Members: Mrs. Parent, mother

Tom Brown, vision consultant

Fred Greene, orientation and mobility specialist

Sally Schaeffer, teacher assistant

Background Information: Parental input and involvement

Strengths

- · academically bright
- supportive family
- enthusiastic
- good fine motor skills
- sense of humour
- · loves pets

Areas of Need

- braille skills
- · visual efficiency skills
- orientation and mobility
- increase independent use of assistive technology (CCTV, magnifier)
- social skills
- personal grooming
- visual efficiency
- leisure and recreation skills

Medical Conditions that Impact Schooling	Coordinated Support Services
Ocular albinism; visual acuity 6/60 in both eyes after correction Nystagmus	RECS (Regional Educational consulting Services) – one hour per month CNIB MRU
No current medical conditions that impact schooling	☐ None required at this time

Assessment Data (Specialized Assessment Results)

Assessment Data (openialized Assessment Results)		
Date	Test	Results
May 2006	• TOWL-3	written language skills at grade level
March 2006	functional vision assessment – Tom Brown	see report
	Peabody Mobility Kit for Blind Students	see report
	Assessment for Low Vision for Educational Programs	see report
September 2005	Eye report – on file	visual acuity 6/60 in best eye with correction nystagmus (varies from mild to severe depending on fatigue, degree of visual challenge and wellness)

Current Level of Performance and Achievement	Year-end Summary
September March 2006 Woodcock Johnson-3 Achievement Battery Reading Comprehension: approximately one year below grade level Math computation: at grade level Math problem solving: approximately one year delay Overall Language skills within average range for age	June
Grade Level of Achievement Reporting	nformation
☐ Adapted programming (graded curriculum)	
Modified programming (not graded curricult	
If student is on a modified program, indicate relative to each goal category:	e category of each goal and achievement level
 foundational skills (e.g., communication skills) 	ns, classroom behaviour, gross and fine motor
Goals achieved: ☐ all ☐ most	☐ some ☐ none ☐ not applicable
 academic readiness skills (e.g., readiness in the programs of study in Gradiness achieved: 	
	student in developing independence in the
home, school and community) Goals achieved: □ all □ most	□ some □ none □ not applicable

Long-term Goal: Shannon will master Grade 4 work as measured by classroom tests based on the Programs of Study, while addressing her specific needs through different techniques of accessing print and classroom materials, improving her acquisition of braille, reading and writing skills.

Short-term Objectives	Assessment Procedures	Progress Review
Shannon participates fully in Grade 4 Language Arts using braille. Shannon's braille reading rate will increase by 10 words per minute by December.	Tom Brown will assess Shannon's braille skills including reading rate in December.	
Shannon will use her braille reading and writing skills to complete 100% of social studies assignments without loss of performance by December.	Shannon is assessed in social studies using classroom criterion.	Accompany of the contract of t

- BrailleNote, brailler, braille printer, computer, printer
- CCTV and monocular
- slant board
- desk magnifier

Long-term Goal: Shannon will use assistive technology commensurate with her abilities to access Grade 4 classroom work.

Short-term Objectives	Assessment Procedures	Progress Review
Shannon will use a monocular, CCTV and desk magnifier to read information from the board and her textbook well enough to complete all Grade 4 math assignments.	Tom Brown will assess Shannon's monocular, CCTV and organization skills. Shannon is completing assignments and tests as measured by classroom criterion.	
Shannon will use BrailleNote and computer to complete three assignments per week by December. Her accuracy with assignments will be consistent with her performance on other assignments.	Tom Brown and teacher determine which assignments Shannon will complete and track this information.	and Primary School (1974) in Primary School (1974) in The Control (1974) in Primary School (1974
	AMERICANIAN LITERATURAN SANT TRANSPORTENTATIVA SANTA LITERATURAN PROPERTY VINES SANT SANTAS AND AMERICAN ASSESSMENT AND ASSESSMENT AND ASSESSMENT AND ASSESSMENT AND ASSESSMENT	
Non-literature of Asserting of Proof, No. 100 None of the Asserting of Note Asserting		macromopole un apper vigi de possibilitar es el « y Anti-Vicini de »

- BrailleNote, brailler, braille printer, computer, printer
- CCTV and monocular
- slant board
- · desk magnifier
- desk to accommodate brailler and CCTV materials
- · shelving for braille books, large print materials

Long-term Goal: Shannon will be able to travel safely and efficiently anywhere within the school building with 100% accuracy by the end of the school year.

Short-term Objectives	Assessment Procedures	Progress Review
Shannon will be able to instruct individuals assisting her with sighted guide by providing correct information regarding techniques by December with 100% accuracy.	Orientation and mobility specialist will assess Shannon's knowledge of sighted guide and her ability to transfer these skills.	
Shannon will effectively transfer the skills taught by the O & M instructor into her daily routine at school with 80% efficiency by December	Orientation and mobility specialist will access Shannon's ability to transfer her O & M skills into her daily routine.	
k P 1 S (A). A (A) ABUARN KAP PRI TAMB THA SING THE NA AMERICAN THESE SECURIOR AND ALL AMERICAN	MINISTER AND MAKEN WE A 2 N. F. S. 118 BANG ON MY AND SE SAME VALUE OF THE PROPERTY AND	Andreitis, Advisitis, Markets and Nat. 28. Aprentio 9. agrees to entreen char.
nati "Andreadh a' Andréadh aith aith an teadh aith air a' 197 Mail a' Airthean air a' Airte an Cairle an Cairl	a noonna viidinnes "mississa amissa myö osimissä ona alminintaani, esi aala ala aa ossa asin sään sään sään sä	with the second section of the second

Planning for Transition

- Shannon has access to curriculum materials at the same time as her sighted peers.
- Shannon has access to teacher prepared materials at the same time as her classmates.
- Order materials from MRU by April 2007 for the 2007/2008 school year.
- · Meet with CNIB in April to determine availability of summer programming opportunities.
- Inform family of CNIB library services so that Shannon has access to reading materials in leisure time.
- Outline orientation and mobility needs for Grade 5 as well as in the home and community.
- Identify members of the learning team for the 2007/2008 school year and outline roles and responsibilities. Determine frequency and level of involvement.
- Ensure that Shannon's furniture requirements are moved into the receiving environment.

Additional Information	
Signatures	
I understand and agree with the information	contained in this Individualized Program Plan.
D	
Parents	Date
IPP Coordinator/Teacher	Date
Principal	 Date
,	

Section 3 — Appendices

Appendix A: Student Monitoring Form

Appendix B: Profil de l'élève ayant une déficience grave (formulaire)

Appendix C: Recording Anecdotal Information - Code 42

Appendix D: Commonly Asked Questions

Appendix E: Glossary Appendix F: Resources





St 20

4lberta		Cognitive	CODE	
41 Severe Cognitive 42 Severe Emotional/Behavioural			rioural	
tudent Monitoring Form	43 Severe	43 Severe Multiple		
evere Disabilities Fundin	a 44 Severe	Physical or Medica	l, including Autism	
007/2008	45 Dearne			
00772000	46 Blindn	ess		
chool Authority				
chool			, , , , , , , , , , , , , , , , , , ,	
udent Name				
berta Student Number (ASN)				
rth date (yy/mm/dd)	Gr	ade		
acement (describe)				
Supporting documentation from the a				
Diagnosis	Year of Diagnosis		al Conducting ssment	
Bidgilosis	Biagnosis	7550	Samerit	
Additional assessment information (p	lease attach copies):			
How does the condition/disability imp.	act the student in the l	earning environme	ent?	
now does the conditional ability imp	dot the stadent in the r	carring crivinoriii	Circ:	
Services provided in accordance with	the Funding Manual fo	or School Authorit	ies 2007-2008	
School Year. Identify three or more of	the following support	s from (a) to (e) th	at are being	
provided to the student:		2007/2009.		
a) Frequent specialized one-on-one i	ntervention provided d	uring 2007/2008:		
specialized setting with teacher		(hours per day):	(staff:student ratio)	
small group work with teacher and/o	r teacher assistant		(staff:student ratio)	
teacher assistant		(hours per day)	(staff:student ratio)	
interpreter		(hours per day)	(staff:student ratio)	
other (specify)				
b) Specialized equipment and/or as	ssistive devices provid	ed during 2007/20	08:	
communication devices	to the same of the	T/PT equipment		
assistive technology/devices	sr	pecialized furniture		

sound field amplification

other (specify)

personal FM system

specialized software

c) Assistance with personal of	care/health-related interventions provided during 2007/2008:
assistance with personal hygie catheterization g-tube feeding administration of medication other	ene
d) Frequent documentation o	f behavioural and/or medical status during 2007/2008:
Behaviour checklist Frequency Medical medical log	
Frequency	hourly daily weekly monthly
e.g., Regional Educational Consulting	the student at a cost to the system provided during 2007/2008: In Service teams: (REACH, CASE, ERECS, RESEAU), Student Health Partnership. dividual student on a regularly scheduled basis. In speech therapist
4. Individualized Program Plan (IPF	assessed needs of the student and includes specific educational
This IPP has been developed, parent/guardian.	implemented and signed by the learning team, including the
DECLARATION Relevant assessment documentation listed in 3 (a-e) are in place, a curren Severe Disabilities Funding criteria.	n to support the claim is available, at least three of five supports It IPP is included in the student's file, and the student meets the
Date	Signature of School Authority Designate

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	SVP COCHEZ UNE CATÉGORIE
<u>41</u>	Déficience cognitive grave
42	Déficience émotive et comportementale grave
43	Déficiences graves multiples
44	Déficience physique ou médicale grave (autisme)
45	Surdité
<u>46</u>	Cécité

(formulaire)	45 Surdité		
Financement 2007-2008	46 Cécité		
Autorité scolaire			
École			
Nom de l'élève			
Numéro d'identification de l'élève)			
Date de naissance (aa/mm/jj))	Ni	liveau scolaire	
Placement (décrivez)			
Documentation d'appui des profess	sionnels concernés (veuil	illez inclure dans le dossier de l'élève) :	
Diagnostic	Date du diagnostic	Professionels faisant le diagnost	ic
De quelle façon est-ce que cette co	ondition affecte l'élève da	ans l'environnement d'apprentissage	e?
Services offerts selon le manuel de des déficiences graves (Funding M au moins trois services d'appui (de a) Instruction/intervention courant	lanual for School Author e « a » à « e ») présentem	rities 2007-2008 School Year. Identifi nent offerts à l'élève:	
aide-enseignant	ignant/aida enesignant	(heures par jour) (rapport élèves/perso	
petit groupe de travail avec ense local spécialisé avec enseignant	ignanvalue-enseignant	(heures par jour) (rapport élèves/perso (heures par jour) (rapport élèves/perso	
interprète		(heures par jour) (rapport élèves/perso	
autre (spécifiez)	_		
b) Équipement spécialisé ou adap	oté – 2007/2008:		
appareils de communication	Équipement r	pour l'ergothérapie ou la physiothérapie	٥
aide par technologie d'ordinateur			
amplificateur de voix	système FM		
autre (spécifiez)	logiciel spécia	alisé	

	c) Aide pour les besoins essentiels – 2007/2008:
	aide pour les soins d'hygiène sonde fonctions alimentaires – entraînement thérapie respiratoire administration d'oxygène gestion d'appareils ergothérapie/physiothérapie administration de médicaments entraînement à l'utilisation de fauteuil roulant ou de marchette entraînement à l'orientation et à la motricité autre (spécifiez)
	d) Documentation régulière sur le comportement et la santé – 2007/2008:
	Comportement liste de notes plan de autre contrôle anecdotiques comportement
	Fréquence → par heure par jour par semaine par mois
	Médical journal médical plan de soins médicaux autre d'urgence
	Fréquence → par heure par jour par semaine par mois
	Par exemple : Les équipes de services de consultation en adaptation scolaire (REACH, CASE, ERECS, Consulting Services et Réseau provincial d'adaption scolaire); Student Health Partnership. Les services doivent être offerts à l'élève selon un horaire bien établi. enseignant itinérant orthophoniste spécialiste de la vision conseiller en adaptation scolaire consultant en technologie services d'infirmière spécialiste de l'ouïe psychologue enregistré audiologiste ergothérapeute physiothérapeute spécialiste du comportement
	psychiatre agent de liaison conseiller pédagogique
	autre (spécifiez) :
4.	Plan d'intervention personnalisée (PIP) :
	Un PIP en cours, pertinent à la déficience décrite ci-dessus et aux besoins individuels de l'élève, est élaboré, signé par l'équipe-école et par le parent/gardien, et implanté formellement.
Une (a -	CLARATION e documentation pertinente à la demande est disponible, trois des cinq appuis énumérés au numéro 3 e) en place, un PIP en cours est inclus dans le dossier de l'élève. L'élève répond aux critères de incement pour les personnes ayant des déficiences graves (Severe Disabilities Funding).
_	Date Signature de l'autorité scolaire désignée

			Result	Did the student comply or was there further escalation immediately following the adult response? How was the incident resolved?	
- Code 42			Adult Response	How did the observing adults respond to the student's behaviour?	Date
al Information			Function of Behaviour	What was the student trying to get or to avoid?	
Sample Chart for Recording Anecdotal Information - Code 42	School:	Week:	Context	What was the student asked to do? What happened immediately prior to the student engaging in the problematic behaviour?	
lart for Record			Location	Where is each behaviour occurring?	
Sample Ch			Frequency	How many times during the week was each behaviour observed?	Teacher's signature
	Student:	Grade	Behaviour	What does the student say or do that is problematic? (No judgments or conclusions, just what was observed.)	Ţ

	Chart	or Recording	Anecdotal In	Chart for Recording Anecdotal Information - Code 42	ode 42	
Student:			School:			
Grade			Week:			
Behaviour	Frequency	Location	Context	Function of Behaviour	Adult Response	Result
F	Teacher's signature				Date	

Answers to Commonly Asked Questions

The following are answers to commonly asked questions and examples of best practices.

Why does Alberta Education need all this information?

Alberta Education reviews documentation to determine if students meet the criteria for severe disabilities funding. Criteria include diagnosis, effect of the diagnosis on the student in a learning environment, identified supports and services in place, and current, implemented IPPs. The results of the documentation review are used to approve severe disability funding for private schools, charter schools and DSEPS and to adjust jurisdiction severe disabilities profile numbers.

What is the relationship between the diagnosis and the severity of the disability?

Diagnoses are important in determining whether students have special education needs, but the degree of need is determined by the impact of the conditions on school performance and the extent to which accommodations and supports are required for students to learn and be successful in the classroom. The relationship between a clinical diagnosis and the required level of special education programming and supports is not direct. The level of special educational need is determined by an assessment of:

- · the number of areas of functioning affected
- · the extent to which functioning is affected in each area
- · the effect on others
- the amount of support required.

What are "services at a cost to the system"?

Additional costs may be incurred only in cases where the professional is working directly with the student related to the goals and strategies of the IPP. For example, the school counsellor may work directly with an individual student on anger management, on a regularly scheduled basis to help meet a goal on the student's IPP. Cases where the counsellor is working on career counselling, ensuring that a student's homework book is signed, or working with a class on issues, are not eligible levels of support.

Does principal/administration time qualify as a level of service?

What if all of the student information is not available at the time of the file review?

Student information, including assessment information and the student's IPP, must be in place for review by Alberta Education so that timely approvals of severe disabilities funding or adjustments to jurisdiction profiles can be made.

Glossary

Accommodations	Any changes to instructional strategies, assessment procedures, materials, resources, facilities or equipment.
Adapted programming	Programming that retains the learning outcomes of the Program of Studies and where adjustments to the instructional process are provided to address the special education needs of the student.
Assessment data	Diagnostic assessment data used to determine special education programming and services.
Augmentive communication devices	Technology designed to enhance communication, such as automated communication board; Dynavox; SpeakEasy.
Brailler	A machine used to produce braille—a system of writing and printing for persons with vision loss which uses raised points or dots.
Current documentation	Current documentation refers to assessment data from specialists, including educational assessments; medical/health assessments such as vision, hearing, physical, neurological; speech and language assessments; occupational therapy, physiotherapy, behavioural, psychological or psychiatric assessments. Current assessment data/documentation is generally considered to be data that has been collected within the last two or three years.
Frequency modulation (FM) system	An amplification system that is worn by the student with hearing loss. The speaker/ teacher wears a microphone and the speaker's voice is transmitted to a receiver which is directed into the student's hearing aids.
Functional assessment	Includes both formal (some objective data such as a standardized behavioural checklist) and anecdotal and/or direct observations. In addition to a description of clinically relevant behaviour, the assessment should provide information on the student's functioning in the school environment in such areas as: social functioning organization/independent work skills related to both academic and non-academic tasks life skills safety and support needs
Individualized program plan (IPP):	A concise plan of action that is designed to address the student's specific special education needs and is based on diagnostic information which provides the basis for intervention strategies, and includes the following essential information: • assessment data • current level of performance and achievement • identification of strengths and areas of need • measurable goals and objectives • procedures for evaluating student progress • identification of coordinated support services (including health-related), if required • relevant medical information • required classroom accommodations (e.g., any changes to instructional strategies, assessment procedures, materials, resources, facilities or equipment) • transition plans • year-end summary.
Itinerant teacher	Teacher specializing in a particular area of disability who provides direct programming support to the student, teacher and staff. Often included as part of the school team and participates in the development of student IPPs.

Modified programming	The learning outcomes are significantly different from the provincial curriculum and are specifically selected to meet students' special education needs.
Sound field amplification system	An amplification system that allows all students to hear equally well no matter where they are located in the classroom. The system consists of a wireless microphone used by a speaker, with the voice being amplified within the room.

Resources

Administration Resources

The following Alberta Education resources are available on the department's website at: www.education.gov.ab.ca.

Handbook for the Identification and Review of Students with Severe Disabilities 2007/2008 www.education.gov.ab.ca/k 12/specialneeds/Hdbk SevereDisabilities 2007-2008.pdf

Funding Manual for School Authorities 2007-2008 School Year www.education.gov.ab.ca/funding/FundingManual

Requirements for Special Education in Accredited-Funded Private Schools (2006) www.education.gov.ab.ca/k_12/privateschools/requirementsSE.pdf

Special Education Coding Criteria 2007/2008 www.education.gov.ab.ca/k 12/specialneeds/SpEdCodingCriteria 2007-2008.pdf

Standards for Special Education, Amended June 2004 www.education.gov.ab.ca/k_12/specialneeds/SpecialEd_Stds2004.pdf

Information Package for Alberta School Authorities for the 2007/2008 School Year In preparation for data exchange activities for the 2007/2008 school year, Information Services Branch has consolidated some information that is applicable to the operations in your school. This material is available at: www.education.gov.ab.ca/technology/isb/current/

Student Information System User's Guide

This is a complete guide to submitting student registrations. The Student Information System (SIS) is a provincial student information database developed and maintained by Learner Records and Data Exchange (LRDE) at Alberta Education.

www.education.gov.ab.ca/technology/isb/schinfo2005/SIS User Guide 2005 2006.pdf

Special Education Programming Resources

The following Alberta Education resources can be purchased from the Learning Resources Centre. For ordering information, visit www.lrc.education.gov.ab.ca or telephone (780) 427-5775; toll-free in Alberta at 310-0000. The books marked with are also available in pdf format from

www.education.gov.ab.ca/k_12/specialneeds/resource.asp.

Building on Success: Helping Students Make Transitions from Year to Year (2006) — This resource provides practical strategies and sample tools for helping students make successful transitions from one school year to the next. The sample tools can be used to help students, parents and teachers collect, organize and share information about a student's individual strengths, abilities and learning needs. Accompanying CD-ROM contains both Word and pdf versions of sample tools.

The Learning Team: A Handbook for Parents of Children with Special Needs (2003) This book for parents of children with special needs is a revision and expansion of the resource Partners During Changing Times (1996). It provides a general overview of how parents can be involved in the education of their children and includes:

- strategies for participating in the child's learning team
- suggestions for parents to enhance and enrich their child's learning at home
- practical information and suggestions for:
 - helping children make successful transitions
 - voicing parent concerns
 - staying informed.

Essential Components of Educational Programming series

The Essential Components of Educational Programming series is intended to support appropriate educational programming, as outlined in the Standards for Special Education, Amended June 2004. The series has been designed for classroom teachers, resource personnel, administrators and parents.

Three books are available in pdf format at

www.education.gov.ab.ca/k_12/specialneeds/essentialcomponents.asp:

- Essential Components of Educational Programming for Students with Autism Spectrum Disorders
- Essential Components of Educational Programming for Students with Behaviour Disabilities
- Essential Components of Educational Programming for Students Who Are Blind or Visually Impaired

The fourth book, Essential Components of Educational Programming for Students Who Are Deaf or Hard of Hearing, will be published in 2007.

Programming for Students with Special Needs series

Book 1 — Teaching for Student Differences (1995)

Highlights strategies for differentiating instruction within the regular classroom for students who may be experiencing learning or behavioural difficulties, or who may be gifted and talented. It also describes a process for modifying the regular program and includes forms to assist in teacher planning.

Book 2 — Essential and Supportive Skills for Students with Developmental Disabilities (1995) Includes developmental checklists for communication skills, gross and fine motor skills, as well as charts and checklists, which provide a continuum of life skills by domain (domestic and family life, personal and social development, leisure/recreation/arts, citizenship and community involvement, career development). It replaces the Alberta Education curricula (1983) for educable mentally handicapped, trainable mentally handicapped and dependent mentally handicapped students.

Book 3 — Individualized Program Planning (2006) A

This resource describes a process for IPP development and includes strategies for involving parents. It provides information on writing long-term goals and short-term objectives. Forms and checklists are included to assist in planning. Transition planning also is addressed, along with case studies and samples of completed IPPs.

Book 4 — Teaching Students Who Are Deaf or Hard of Hearing (1995) Includes information on the nature of hearing loss, various communication systems, program planning and teaching strategies. A section on amplification and educational technologies includes hints for troubleshooting hearing aids and FM systems.

Book 5 — Teaching Students with Visual Impairments (1996)

This resource offers basic information to help provide successful school experiences for students who are blind or visually impaired. The book addresses:

- the nature of visual impairment
- educational implications
- specific needs
- instructional strategies
- the importance of orientation and mobility instruction
- the use of technology.

Book 6 — Teaching Students with Learning Disabilities (1996)

This resource provides practical strategies for regular classroom and special education teachers. Section I discusses the conceptual model and applications of the domain model. Section II includes identification and program planning, addressing early identification, assessment, learning styles and long-range planning. Section III contains practical strategies within specific domains including meta-cognitive, information processing, communication, academic and social/adaptive. Section IV addresses other learning difficulties including attention-deficit/hyperactivity disorder and fetal alcohol syndrome/possible prenatal alcohol-related effects. The appendices contain lists of annotated resources, test inventories, support network contacts and black line masters.

Book 7 — Teaching Students Who Aare Gifted and Talented (2000)

This resource provides practical strategies for regular classroom and special education teachers. Section I addresses administration of programs for the gifted and talented at both the district and school levels. Section II discusses concepts of giftedness, highlighting nine theoretical models. Section III discusses identification of gifted and talented students, developing IPPs, and and involving parents. Section IV discusses giftedness in the visual and performing arts. Section V contains strategies for designing and implementing programs, including curriculum modification. Section VI discusses post-modernism and gifted education. The appendices contain lists of annotated resources, test inventories, support network contacts and black-line masters.

Book 8 — Teaching Students with Emotional Disorders and/or Mental Illnesses (2000) This resource takes a comprehensive look at six emotional disorders or mental illnesses—eating disorders, anxiety disorders, depression, schizophrenia, oppositional defiant disorder or illness—and presents strategies for teachers, parents and other caregivers to use to assist students.

Book 9 — Teaching Students with Autism Spectrum Disorders (2003) This resource provides basic knowledge about this spectrum of disabilities, educational programming implications and programming strategies.

Book 10 — Teaching Students with Fetal Alcohol Spectrum Disorder: Building Strengths, Creating Hope (2004) $\stackrel{}{\triangleright}$

This resource is a revision and expansion of *Teaching Students with Fetal Alcohol Syndrome and Possible Prenatal Alcohol-related Effects* (1997), a teacher handbook developed by Alberta Education and the Alberta Partnership on Fetal Alcohol Syndrome. It includes key considerations for planning effective education programs and strategies for creating a positive classroom climate, organizing for instruction and responding to students' individual needs.



